FILED 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT Apr 01, 2005 08:00 AM Secretary of State DOCUMENT # M03000002221 1. Entity Name CORAL CIRCLE, LLC Principal Place of Business Mailing Address 222 GRAND AVENUE 222 GRAND AVENUE ENGLEWOOD, NJ 07631 ENGLEWOOD, NJ 07631 02242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0056821 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agen) and title if applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MORM TITLE SCHMIDT, MICHAEL NAME 222 GRAND AVENUE STREET ADDRESS ENGLEWOOD, NJ 07631 CITY-ST-ZIP TITLE U00000283700 NAME 04/01/05-80039-007 50.00 STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY -ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Daytime Phone #

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF