2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS

Jan 18, 2005 08:00 AM Secretary of State **DOCUMENT # M03000003600** 1. Entity Name JANUACELY, LLC-Principal Place of Business Mailing Address 780 N.W. 42ND AVENUE, SUITE 300 780 N.W. 42ND AVENUE, SUITE 300 MIAML FL 33126 MIAMI, FL 33126 01132005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number Not Applicable 20-0371365 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION COMPANY OF MIAMI DO NOT WRITE 201 S. BISCAYNE BLVD., SUITE 1500(BB) MIAMI, FL 33131 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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 000000182181 01/19/05-80016-016 55.00 Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE CAKRITE, LLC 780 N.W. 42ND AVENUE, SUITE 300 STREET ADDRESS MIAMI, FL 33126 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CiTY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

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 ilmited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EECO CARMEN E.DE ABREU 01/14/05 (305)6652610