2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 13, 2005 08:00 AM Secretary of State DOCUMENT # M0400000109 FRANKLIN STREET PARTNERS, LLC Principal Place of Business Mailing Address 1617 W. 22ND STREET 1617 W. 22ND STREET MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 01182005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0648003 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHARER, JAY DO NOT WRITE 1617 W. 22ND STREET MIAMI BEACH, FL 33140 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) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE NAME SCHARER, JAY U00000302731 04/13/05-80083-011 50.00 1617 W. 22ND STREET STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33140 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OF AGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED