## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE:

## Apr 29, 2005 8:00 am Secretary of State **DOCUMENT # M04000005684** 04-29-2005 90048 033 \*\*\*\*50.00 1. Entity Name CR MIAMI, LLC Principal Place of Business Mailing Address 8600 EAST ROCKCLIFF ROAD 8600 EAST ROCKCLIFF ROAD TUCSON, AZ 85750 TUCSON, AZ 85750 20051068 04262005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 71-0937918 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE JC MANAGEMENT, INC. NAME 8600 EAST ROCKCLIFF ROAD STREET ADDRESS CITY-ST-ZIP **TUSCON, AZ 85750** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADORESS CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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.

**FILED**