2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE: Y

SIGNATURE AND TYPE

Feb 14, 2005 08:00 AM Secretary of State DOCUMENT # M98000001444 Entity Name RJKAYAL ENTERPRISES, LLC Mailing Address Principal Place of Business 6910 N.W. 12TH STREET 6910 N.W. 12TH STREET MIAMI, FL 33126 MIAMI, FL 33126 01112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-6288602 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KAYAL, RAYMOND J JR. DO NOT WRITE 6910 N.W. 12TH STREET MIAMI, FL 33126 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 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. MGRM TITLE NAME KAYAL, RAYMOND J STREET ADDRESS **6850S.W. 99TH TERRACE** CITY-ST-ZIP PINECREST, FL 33156 TITLE NAME STREET ADDRESS 000000228552 02/14/05-80048-007 50.00 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CDY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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)(f). Florida Statutes. I further certify that the information inclicated 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