FILE NOW: Fee after May 1, will be \$588.75

FILED FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 97 JAN 29 PM 2: 29 1997 DIVISION OF CORPORATIONS Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee **FILING FEE** SECRETARY OF STATE Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company DOCUMENT #L94000000017 1a. Principal Place of Business Address SUSAN BENNETT MARKETING AND MEDIA, L.C. 12734 KENWOOD LANE 2734 KENWOOD LANE #85 185 FORT MYERS FL 33907 FORT MYERS FL 33907 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation D1/01/1994 T. Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0418362 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country sts 75 Arshitomal Lee Hisgoried D2/14/1996 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent Name BENNETT, SUSAN 1920 VIRGINIA AVENUE Street Address (P.O. Box Number is Not Acceptable) #1303 FORT MYERS FL 33901 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE _ DATE . (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) Managing Members/Managers City, State and Zip Code 10. Title **Business Street Address** MGR BENNETT, SUSAN 1920 VIRGINIA AVE., #1303 FORT MYERS FL MGR. BENNETT, PHILIP C 1920 VIRGINIA AVE., #1303 FORT MYERS FL 600002073976---01/30/97--01074--005 ****203.75 ****203.75 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Fiorida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address. SUSAN BENNETT SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER