File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARAMENT OF STATE LIMITED LIABILITY COMPANY FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY -1 PM 2: 32 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY DE STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000000058 1a. Principal Place of Business Address GASTEC ENERGY COMPANY, LC 20217 BACKNINE DR 20217 BACKNINE DR BOCA RATON FL 33498 BOCA RATON FL 33498 2. Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 20217 BACKNING DR. 01/03/1997 Suite, Apt. #, etc. Applied For 58-2288060 City & State Not Applicable 190 CA 5. Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Fee Beguired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name LOWEY, IRVING S 20217 BACKNINE DR Street Address (P.O. Box Number is Not Acceptable) 90000251377: -05/06/38-01093 BOCA RATON FL 33498 918 Suite, Apt. #, etc. ****188.75 ****188.75 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 MOTE Registered Agent signature required when reinstaling) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM LOWEY, IRVING S 20217 BACKNINE DR BOCA RATON FL MGRM STOLZENBERG, PHILIP 20217 BACKNINE DR BOCA RATON FL 'APR - 4 1998 11. do 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

Attachment with an address.

SIGNATURE: January 1-26 98

SIGNATURE: SIGNATURE OF FINITED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Dayline Phone #

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