File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR 31 PM 3:46 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000000749 1a. Principal Place of Business Address Y.D.B. SHOPRITE L.C. 913 NORMANDY DRIVE 913 NORMANDY DRIVE MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 06/09/1998 FLSuite, Apt. #, etc. 163rdSt 4. FEI Number 1991 N. E163 West Applied For 65-0867616 Not Applicable N.M.B, Fl 5. Date of Last Report 6. Certificate of Status Desired 33162 \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office WASERSTEIN, RICHARD 913 NORMANDY DRIVE Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33141 100002834361--3 -04/09/99 - -Q1038 <sub>7</sub>-001. 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 DATE (Registered Agent Ancepting Appeal timent). (NOTE: Registered Agent signature required when new tatriags 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 1991 N.E. 163RD STREET MGR BERAHA, YASEF NORTH MIAMI FL 11. Ido hereby certify that the information supplied does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurat ignature shall have the same legal effect as if made under oath, that I am a managing member or manager of the this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an limited liability company or the receivattachment with an address. SIGNATURE:

INHSE10 R (12-98)