File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

SIGNATURE:

INHSE 10 R (12-98)

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris FILED ANNUAL REPORT 1999 Secretary of State DIVISION OF CORPORATIONS 99 APR 20 AN 10: 11 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETARIA OF LORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # L98000003103** 1a. Principal Place of Business Address 481 INVESTMENTS, L.L.C. 481 E. HILLSBORO BLVD., SUITE 100A 481 E. HILLSBORO BLVD., SUIT DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 12/08/1998 \mathbf{FL} Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country Žip \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name HOROWITZ, GARY I 481 E. HILLSBORO BLVD., SUITE 100A Street Address (P.O. Box Number is Not Acceptable) DEERFIELD BEACH FL 33441 Suite, Apt. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE _ .. DATE _ (Registered Agent Autebring Apparament): (NOTE Registered Agent signation requires when our viriage 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR HOROWITZ, GARY I 481 E. HILLSBORO BLVD., SU DEERFIELD BEACH FL 200002853682----04/27/93--01073--014 ****188.75 ****188.75 4. 7. 17 11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. If urther 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 expowered 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.