File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 APR 29 AM 9: 45 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETARY OF STATE TALLAHASSEE, FLORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # M95000000299** 1a. Principal Place of Business Address SINGER ASSET FINANCE COMPANY, L.L.C. 1800 OLD OKEECHOBEE ROAD, SUITE 200 1800 OLD OKEECHOBEE ROAD, SU WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 3. Date Organized or Qualified 3a. State of Formation 2. Principal Place of Business 2a. Mailing Address – Same – 10/13/1995 DE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 22-3399978 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Fee Required 02/13/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office KRONER, BURT Spoh \(\)
\$ (P.O. Box Number is Not Acceptable) 1800 OLD OKEECHOBEE ROAD, SUITE 200 WEST PALM BEACH FL 33409 Zip Code 3343, 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 4-27-98 DATE SIGNATURE (Registered Agent Accepting Appointment) (NOTI: Registered Agent signature required when reinstating) **Business Street Address** City, State and Zip Code 10. Title Managing Members/Managers MGRM WEST PALM BEACH FL 700 Banyan Trail Boca Raton, Fl. ****188.75 ****188.75 APR 3 0 1990 11. I 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

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 prospective 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.

SIGNATURE: Levelue

Andrew G Spohn 4-27-98 561-