File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR - 1 PH 3: 13 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 | Make Check Payable To: FLORIDA DEPARTMENT OF STATE

| Name and Mailing Address of Limited Liability Company | DOCUMENT # L93000000265 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1a. Principal Place of Business Address BENCHMARK ENTERTAINMENT L.C. 2071 N DIXIE HWY 2071 N DIXIE HWY POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 2 Principal Place of Business 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 08/18/1993 FL. Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0433495 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Fee Required 02/26/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office KRESS, ALEXANDER F 2071 N DIXIE HWY Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33060 Suite Apt. #, etc. DEBUTTE TERRET 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 SIGNATURE \_\_ \_\_ (Registered Agent Accepting Appropriated). (NETE: Registered Agent superior required when Rusiness Street Address City, State and Zip Code 10. Title Managing Members/Managers MEM KRESS, ALEXANDER F 13843 LE BATEAU ISLE PALM BEACH GARDENS F HALLIBURTON, RONALD D MEM 951 FERN DRIVE DELRAY BEACH FL MEM JDJR, INC. 2071 N DIXIE HIGHWAY POMPANO BEACH FL 11 1do 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 trustge empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBLE OF MALAGER

attachment with an address.
SIGNATURE: