Daytime Phone #

| 2002 | | DIIGINEGE | DEDART | /IIDD |
|------|---------|-----------------|--------|-------|
| ZUUZ | UNIFURM | BUSINESS | REPURI | (UDN |

SIGNATURE:

| DOCU 1. Entity Nam | - | 00000363 | ÷ | i | 6 | |
|--|--|--|---------------------|--|-----------------------------------|---|
| _ | APITAL PARTNERS I, LTD. | | FILED | | 8 | |
| | · · · · · · · · · · · · · · · · · · · | | | 02 APR 19 AM 10: 5 | 8 | |
| Principal Place of Business Mailing Address C/O EURO AMERICAN MANAGEMENT. INC. 4350 WEST CYPRESS STREET. SUITE 250 Mailing Address C/O EURO AMERICAN MANAGEMENT. INC. 4350 WEST CYPRESS STREET. | | | | SECRETARY OF STAT | iE IDA | |
| TAMPA FL 33607 | | TAMPA FL 33607 3. Mailing Address | ; ; | | | |
| | | J. Mailing / Radiooo | 1 | | | |
| 4300 W. Cypress Street Suite 1075 4300 W. Cypre Suite 1075 Suite 1075 | | press Street | DUE BY MAY 1, 2002 | | | |
| Tampa, FL 33607 | | Tampa, FL 33607 | | 4. FEI Number 98-0167036 | Applied For Not Applicable | |
| Zip | Country | Zíp | Country | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| | 6. Name and Address of Current | Registered Agent | Name | 7. Name and Address of New Registered | l Agent | |
| | O MANAGEMENT, INC. ST CYPRESS STREET, SUITE 250 L 33607 | | Str. t 430 | 0 W. Cypress Street, Suite 107 npa, FL 33607 | 25 | |
| | | | Cit | | i | |
| 8. The above | named entity submits this statement f | the purpose of changing | | ered agent, or both, in the State of Florida. D. BURDGE | 4 2002 | |
| SIGNATURE . | Signature, typed or printed name of registered agent | t and title if applicable. | EXECUTIVE V | ICE PRESIDENT DATE | | |
| 9. Capital Co as Shown | on record. / ψ3,023,000.00 | 10. Amount of Cap in FLORIDA to | date. | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION | | |
| | | | | STERED AND ACTIVE WITH THIS OFFI ent must be filed to change a general p | artner. | |
| 12. DOCUMENT# | GENERAL PARTNE P99000018741 | R INFORMATION | 13. | ADDRESS CHANGES OF 4300 W. Cypress Street | | ŝ |
| NAME STREET ADDRESS CITY-ST-ZIP | EURO XIV, INC. 4350 W. CYPRESS STREET, SL TAMPA FL 33607 | JITE 250 | CITY-ST-ZIP | Suite 1075 Tampa, FL 33607 | CRSEON (9/01) | |
| DOCUMENT # | TANKA (L 3300) | | STREET ADDRESS | 300005419 | | 2 |
| NAME STREET ADDRESS | | | CITY-ST-ZIP | | 01021-005 | |
| DOCUMENT # | | | STREET ADDRESS | | 1 | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | CITY-ST-ZIP | į | (Male) | |
| DOCUMENT # | | | STREET ADDRESS | . <u></u> | | |
| STREET ADDRESS CITY_ST-ZIP | | | CITY-ST-ZIP | | | |
| DOCUMENT # | | | STREET ADDRESS | | | |
| STREET ADDRESS CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| DOCUMENT # NAME | | | STREET ADDRESS | | | |
| STREET ADDRESS CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| 14. I hereby of indicated the receiv | certify that the information supplied with on this report is true and accurate and ver or trustee empowered to execute the | n this Hing does not qualify I that my signature shall hav its report as required by Chi | ` | ection 119.07(3)(i), Florida Statutes. I further comade under oath; that I am a General Partner of CED. BURDGE | non 7/3 | |
| CICNIAT | TIDE. SIGNAU | 11212 3 1/6 | EXECUTIVE EXECUTIVE | VE VICE PRESIDENT APR 4 2 | 002 353-8800 | |