File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY & FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 **DIVISION OF CORPORATIONS** 98 MAY 13 PH 2: 45 130.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company DOCUMENT # L93000000233 1a. Principal Place of Business Address HALO HOLDINGS, L.C. 345 W. 74TH PLACE 345 W. 74TH PLACE HIALEAH FL 33014 HIALEAH FL 33014 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation Suite, Apt. #, etc. Suite, Apt. #, etc. 4.421/12/1993 Applied For City & State City & State Not Applicable 5. 65-9431-007 6. Certificate of Status Desired Country Zip Country SB Z5 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent GREENE, MICHAEL S Street Address (P.O. Box Number is Not Acceptable) 201 S. BISCAYNE BLVD. SUITE 900 Suite, Apt. #, etc. MIAMI FL 33131 City Zip Code . 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. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR SARMIENTO, LOUIS 345 W. 74TH PLACE HIALEAH FL MGR BROMBERGO, HENRY 345 W. 74TH PLACE HIALEAH FL ****188.75 ****188.75 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 cath; that I am a managing member or manager of the limited liability company or the receiver or trustee 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 OF PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/22/98 305-821-3300 Date Daytime Prone #

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attachment with an address.

SIGNATURE: