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 Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS FILING FEE | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Malling Address of Limited Liability Company **DOCUMENT #** L94000000315 1a. Principal Place of Business Address CYNTEX INVESTMENTS, L.C. 17760 FIELDBROOK CIRCLE 17760 FIELDBROOK CIRCLE BOCA RATON FL 33496 BOCA RATON FL 33496 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 07/11/1994 I. FEI Number Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 65-0504681 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent Name WOLLSTEIN, EDWARD Street Address (P.O. Box Number Is Not Acceptable) 17760 FIELDBROOKS CIR. 300002482223---04/08/98--01023--023 BOCA RATON FL 33496 Suite, Apt. #, etc. ****188.75 ****188.75 City 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. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE . DATE (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM WOLLSTEIN, EDWARD 17760 FIELDBROOK CIR. BOCA RATON FL MGRM WOLLSTEIN, CYNTHIA 17760 FIELDBROOK CIR. BOCA RATON FL 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 eath; 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 OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

attachment with an address.
SIGNATURE: