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 98 MAR 23 PH 3: 39 DIVISION OF CORPORATIONS 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 #** L94000000399 1a. Principal Place of Business Address BAM REALTY ASSOCIATES, L.C. 2300 W OAKLAND PARK BLVD. 2300 W OAKLAND PARK BLVD. SUITE 500 SUITE 500 FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 08/12/1994 4. FEI Number Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 35-9488<u>9</u>71 5. Date of Last Report 6. Certificate of Status Desired Country Žip Country 58-75 Additional Lee Required 6. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent PICCININNI, ALFRED Street Address (P.O. Box Number is Not Acceptable) 2300 W. OAKLAND PARK BLVD. SUITE 500 3000024666553-Suite, Apt. #, etc. FORT LAUDERDALE FL 33311 -03/24/98--01085--012 ****188.75 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 Fiorida. 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 MGRM FITZGERALD, ROBERT 2300 W OAKLAND PARK BLVD. FT. LAUDERDALE FL MGRM BERCUN, MICHAEL 2300 W OAKLAND PARK BLVD. FT. LAUDERDALE FL MGRM PICCININNI, ALFRED 2300 W OAKLAND PARK BLVD. FT. LAUDERDALE FL 11 I do hereby certify that the Information supplied with this filing does not quality 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 ilmited 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

Daytime Phone #

attachment with an address.

SIGNATURE: