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 ANNUAL REPORT FILED Secretary of State
DIVISION OF CORPORATIONS 1999 99 FEB 22 AN 9:00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SCURETARY UN STAIL TALLAHASSEE, FLORIDA Name and Mailing Address
of Limited Liability Company **DOCUMENT # 194000000412** 1a. Principal Place of Business Address D.G. AGENCY L.C. 8420 NW 52ND STREET, SUITE 200 8420 NW 52ND STREET, SUITE 2 MIAMI FL 33166 MIAMI FL 33166 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 8420 NW 52nd Street 8420 NW 52nd Street 8/17/1994 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 200 200 Applied For City & State City & State 65-0521907 Not Applicable MIAMI, FLORIDA MIAMI, FLORIDA 5. Date of Last Report 6. Certificate of Status Desired Country 3/16/98 SB 75 Admil over Fee Holy along 🍱 33166 USA USA 33166 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name RIEGO, EDUARDO DEL 8410 NW 53RD TERRACE, SUITE 218 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33166 8420 NW 52nd Street Suite 200 Suite, Apt. #, etc. 200 City Zip Code MIAMI 33166 9. Pursuant to the provisions of Sections 606.416 and 606.508, 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 2-18-99 SIGNATURE . DATE ettre required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 3351 SW 110TH COURT MGR RIEGO, EDUARDO DEL MIAMI FL 11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(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 of 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

EDUARDO OIL RUGO

attachment with an address.

SIGNATURE: