File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 98 MAR 30 PM 2: 45 1998 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETARY DE STATE TALLAMASSEE, FLORED \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT #** L94000000653 1a. Principal Place of Business Address MYI HOLDINGS, L.C. 1401 BRICKELL AVE 1401 BRICKELL AVE SUITE 530 SUITE 530 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Fr 12/02/1994 4. FEI Number Suite, Apt. #, etc. Suite, Apt. #, etc. \mathbf{FL} Applied For City & State City & State Not Applicable 65-0537896 Date of Last Report 6. Certificate of Status Desired Country Zip Country \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent MARCO, GERALD A Street Address (P.O. Box Number is Not Acceptable) 1401 BRICKELL AVE SUITE 530 Suite, Apt. #, etc. MIAMI FL 33131 City 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited fiability 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 **MEM** MARCO, GERALD A 1401 BRICKELL AVE, SUITE 5 MIAMI FL MEM YUFE, BORIS 1401 BRICKELL AVE, SUITE 5 11. I do hereby certify that the information supplied with this filling 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 oath; that I am a managing member or manager of the limited liability company or the receiver or type tee 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

attachment with an address.

SIGNATURE: