File on or before May 1, 1999 or Limited Liability Company will be FILEO subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT 99 MAR 24 AM 10: 37 Secretary of State 1999 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L95000000071 1a. Principal Place of Business Address BAYSHORE DEVELOPERS II, L.C. 3701 GALT OCEAN DRIVE 3701 GALT OCEAN DRIVE FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2 Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 01/20/1995 FI. Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0588395 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 03/20/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name KELLA, RANDALL 3701 GALT OCEAN DRIVE Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33308 Suite Apt #, etc. 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 regarded when resist its qui 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 3701 GALT OCEAN DRIVE MGMR KELLA, RANDALL FT. LAUDERDALE FL 10090688-3161-07 ****188.75 ****188.75 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 trustee empowered to execute this report as required by Chapter 608, Florida Stalutes, and that my name appears in Block 10, or on an

NAME OF SIGNING MANY ING MEMBER OR NAMA TER

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attachment with an address
SIGNATURE:

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