FILE NOW: Fee after May 1, will be \$588.75

APPROVEO FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mørtham ANNUAL REPORT Secretary of State 1997 HAY -5 PM 1: 43 1997 **DIVISION OF CORPORATIONS** SECRETARY OF STATE TALLAHASSEE, FLORIDA **FILING FEE** Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company DOCUMENT #1.95000000156 1a. Principal Place of Business Address NEW LAUDERDALE L.C. 2455 E SUNRISE BLVD 2455 E SUNRISE BLVD **SUITE 1102 SUITE 1102** FT. LAUDERDALE FL 33304 T. LAUDERDALE FL 33304 If above mailing address is incorrect in any way. Iline through incorrect information and enter correction in Block 2a. 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation P.O.Box 1665 03/01/1995 Suite, Apt. #, etc. 4. FEI Number One Blue HILL KAZA 22-3484642 Applied For City & State 5-0560660-Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Rockland n 75 Additional Fee Regained 03/01/1996 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent Name INDSEY, THOMAS Street Address (P.O. Box Number Is Not Acceptable) 455-S-CUNRICE DIND UITE 1102 2455 E SUNNISE BLUD AUDERDALL FI 99904 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. AY (SILEBWWAL) SIGNATURE City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** OYCHIG READERS NETWOR E CUMPLER BLVD GUITE TO LAUDUNDALE TE MGRM ONE BLUE HILL PLAZA CALLING CARD CO., INC. PEARL RWER, NY 10% ONE BUE HILL BAZA PEARL RIVER , NY 10965 MGRM NL CORP. 300002167413---05/06/97--01069--004 ****203.75 ****203.75 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 Statutes; and that my name appears in Block 10, or on an

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

INHSE10 R(12-96)

SIGNATURE: