


2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After October 8, 1997. If Dissolved, Minimum Amount Due To Reinstate: \$703.75

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|--|---------------------------|--|--|---|--|
| LIMITED LIABILITY COMPANY ANNUAL REPORT 1997 | |  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | FILED 97 SEP 15 AM 11:30 SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
| FILING FEE \$ 588.75 | | Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE | | | |
| 1. Name and Mailing Address of Limited Liability Company | | DOCUMENT # L95000000418 | | | |
| BANYAN LICENSING, L.C. 757 S.E. 17TH ST CSWY #312 FT. LAUDERDALE FL 33301 | | 1a. Principal Place of Business Address 800 EAST BROWARD BLVD., STE. FT. LAUDERDALE FL 33301 | | | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Organized or Qualified | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 06/02/1995 | |
| City & State | | City & State | | 4. FEI Number | |
| Zip | | Zip | | APPLIED FOR | |
| Country | | Country | | 5. Date of Last Report | |
| | | | | 03/08/1996 | |
| 7. Name and Address of Current Registered Agent | | 8. Name and Address of New Registered Agent | | | |
| BLINDERMAN, RICHARD I 3109 STIRLING ROAD SUITE 101 FT. LAUDERDALE FL 33312 | | Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 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 required when reinstating) | | | | | |
| 10. Title | Managing Members/Managers | Business Street Address | | City, State and Zip Code | |
| MGRM | DAVIS, E. SCOTT | 800 EAST BROWARD BLVD., ST | | FT. LAUDERDALE FL | |
| MGRM | DAVIS, KATHY W | 800 EAST BROWARD BLVD., ST | | FT. LAUDERDALE FL | |
| 100002297141--2 -09/18/97--01080--007 *****588.75 *****588.75 Dec | | | | | |

11. I do hereby certify that the information supplied with this filing 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 attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #