File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY 13 PM 1:13 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.15) Make Check Payable To: FLORIDA DEPARTMENT OF STATE I Mailing Address Liability Company **DOCUMENT #** L95000000418 1a. Principal Place of Business Address BANYAN LICENSING, L.C. 757 S.E. 17TH ST CSWY 800 EAST BROWARD BLVD., STEN #312 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation Principal Place of Business Kroward Blid 06/02/1995 Suite Applied For City & State Not Applicable APPLIED FOR 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Bequired 33351 USA 09/15/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name BLINDERMAN, RICHARD I 3109 STIRLING ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE 101 Suite, Apt. #, etc. FT. LAUDERDALE FL 33312 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 purpode 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 **Business Street Address** Managing Members/Managers 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 100002525941---05/15/98--01101--005 ****188.75 ****188.75 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING ME