


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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|--|---------------------------|--|--|--|--|
| LIMITED LIABILITY COMPANY ANNUAL REPORT 1998 | |  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | FILED <i>4/28</i> 98 APR 27 PM 2:57 SECRETARY OF STATE TALLAHASSEE FLORIDA | |
| FILING FEE \$ 188.75 | | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE | | | |
| 1. Name and Mailing Address of Limited Liability Company | | DOCUMENT # L95000000555 | | 1a. Principal Place of Business Address | |
| MARTECH ENTERPRISES L.C. 10751 SOUTHWEST 77 COURT MIAMI FL 33156 | | | | 10751 SOUTHWEST 77 COURT MIAMI FL 33156 | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Organized or Qualified | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 07/21/1995 | |
| City & State | | City & State | | 3a. State of Formation FL | |
| Zip | | Country | | 4. FEI Number 65-0594960 | |
| | | | | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable | |
| | | | | 5. Date of Last Report 04/24/1997 | |
| | | | | 6. Certificate of Status Desired SIL 75 Additional Fee Required <input checked="" type="checkbox"/> | |
| 7. Name and Address of Current Registered Agent | | | | 8. Name and Address of New Registered Agent/Office | |
| THE LAW FIRM OF LAWRENCE J SPIEGEL CH 343 ALMERIA AVENUE CORAL GABLES FL 33134 | | | | Name Street Address (P.O. Box Number is Not Acceptable) 500002515725--1 Suite, Apt. #, etc. -05/07/98--01093--015 ****188.75 ****188.75 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 500002515725--1 -05/07/98--01093--015 *****8.75 *****8.75 (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 | LOFGREN, CHARLES E | 10751 SOUTHWEST 77 COURT | | MIAMI FL | |
| MEM | WEINSTEIN, MARVIN S | 11833 CAMINITO CORRIENTE | | SAN DIEGO CA | |
| MGRM | WERTHEIM, ROBERT | 17705 DEVEREUX ROAD | | SAN DIEGO CA | |
| MEM | HIMMEL, MARVIN | 12091 TRETAGNIER CIRCLE | | SAN DIEGO CA | |
| MGRM | WRIGHT, JACK | 11737 CAMINITO CORRIENTE | | SAN DIEGO CA | |
| MEM | MORRIS, STEVEN | 4300 HYLAN BOULEVARD | | STATEN ISLAND NY | |
| MEM | WEINSTEIN, MICHAEL | 5 FAIRFIELD AVENUE | | WESTPORT CT 06880 | |
| MEM | DRURY, SIMON | 31 WEST DIANA STREET | | SAN JUAN PR 00968-8005 | |

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: CHARLES E. LOFGREN *Charles E. Lofgren* 4/23/98 (305) 666 7442