File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY -1 PM 2:53 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA Name and Malling Address of Limited Liability Company DOCUMENT # L95000000608 1a. Principal Place of Business Address LOYOLA DEVELOPMENT LIMITED COMPANY 601 DRICKELL KEY DRIVE 601 BRICKELL KEY DRIVE SUITE B SUITE E MIAMI FL 33131 -MIAMI FL 33131 3. Date Organized or Qualified 3a. State of Formation 08/08/1995 4. FEI Number FL Applied For City & State Not Applicable 65-0600040 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required X 02/04/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office HABER, ROBERT M Acceptable) 520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI FL 33131 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 ig Appointment) (NOTE Registered Agent signature required when reinstaling) 10. Title rs/Managers **Business Street Address** City, State and Zip Code MGR LLANES, JOSE LUIS 601 BRICKELL KEY DRIVE, SU MIAMI FL ****197.50 ****197.50 APR - 4 1998, 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 employered to execute this report as required by Chapter 608. Florida Statules; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED OR PRINTED NAME OF

attachment with an address.

SIGNATURE: