File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris Daniel Committee ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 EE 12 11 25 61 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L95000000911 EDWARD D. LIMITED COMPANY 1a. Principal Place of Business Address % WILSHIRE INTERNATIONAL REALTY % WILSHIRE INTERNATIONAL REA 125 WORTH AVE., SUITE 220 125 WORTH AVE., SUITE 220 PALM BEACE FL 33480 PALM BEACH FL 33480 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 11/29/1995 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0630536 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 03/11/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office FRANKS, STANLEY **WILSHIRE INTERNATIONAL REALTY** Street Address (P.O. Box Number is Not Acceptable) 125 WORTH AVE., SUITE 220 PALM BEACH FL 33480 Suite Ant # etc 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. SIGNATURE ____ _ IFAC (Bug sheed Agent Aurophing Approximent). (ACITY Heapsheed Ascet signature required when in behang 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR DURACH, HERBERT 125 WORTH AVENUE, SUITE 22 PALM BEACH FL *197.50 ****197.5**0** 11 1do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19 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. 1008-268-152 HEISHENT DUOSECH SIGNATURE:

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