FILE NOW: Fee after May 1, will be \$588.75

FILED FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 97 FEB -3 PM 2: 37 1997 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee SECRETARY OF STATE TALLAHASSEE, FLORIDA Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 Name and Mailing Address of Limited Liability Company **DOCUMENT** #L9600000006 1a. Principal Place of Business Address TAUBER REAL ESTATE HOLDINGS, L.C. 2320 PELHAM ROAD 320 PELHAM ROAD ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 01/02/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country SB 75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent ALLWEISS, MICHAEL D 1020 PARK STREET NORTH, BT. PETERSBURG FL 33709 RD N. 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, SIGNATURE Registered Agent signature required when reinstating) 10. Title **Business Street Address** Managing Members/Managers City, State and Zip Code MGRM TAUBER, PAUL S 2320 PELHAM ROAD **\$**T. PETERSBURG FL 900002079069--8 ****203.75 ****203.75 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

OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

attachment with an address.

SIGNATURE: