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

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 97 MAR 31 AM 11:56 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 #**1,96000000022 1a. Principal Place of Business Address LUBRICIL CORPORATION, L.C. 1385 CORAL WAY .385 CORAL WAY SUITE 406 SUITE 406 MIAMI FL 33145 MIAMI FL 33145 If above mailing address is incorrect in any way, line through incorrect Information and enter correction in Block 2a

2. Principal Place of Business

2. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 7252 NW 31ST ST. 7252 NW 3155 ST. 01/09/1996 Sulte, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0648632. Not Applicable MIAMI FL MIAMIL FL 5. Date of Last Report 6. Certificate of Status Desired で 3312ス Country <sup>200</sup> 33122 Country SB.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent ANTON, LIDUARDO 1385 CORAL WAY Street Address (P.O. Box Number Is Not Acceptable) SULTE 406 MIAMI Ft 33145 Suite, Apt. #, etc. Zip Code 9. Pursuant to the frovi ons 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 \_\_\_. ( gistered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** 52 228 N.W. 31ST ST. MGR VEGA, PETER M MIAMI FL MCR FISHER, DENNIS NIAMI FL MGR DU TOIT, BETHSEUS E MIAMI FL 900002131279--9 -04/02/97--01064--003 \*\*\*\*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 you 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

SIGNATURY AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3051673-9291

Daylime Phone #

INHSE10 R(12-96)

attachment with an address.

SIGNATURE