

## 2nd NOTICE:

Limited Liability Company Will Be Dissolved On Or  
After October 8, 1997. If Dissolved, Minimum Amount  
Due To Reinstate: \$703.75

LIMITED LIABILITY COMPANY		FLORIDA DEPARTMENT OF STATE	
ANNUAL REPORT		Sandra B. Mortham	
1997		Secretary of State	
		DIVISION OF CORPORATIONS	
<b>FILING FEE</b> \$ 588.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000000183	
BAYWEST HOLDINGS, L.C. % 2001 SOUTH SURF ROAD APT. 7-D HOLLYWOOD BEACH FL 33019		1a. Principal Place of Business Address % 2001 SOUTH SURF ROAD APT. 7-D HOLLYWOOD BEACH FL 33019	
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	
Suite, Apt. #, etc.		5332 Highway No. 7, 2nd Floor	
City & State		Woodbridge	
Zip		Ontario Canada	
Country		L4L 1T3	
		Canada	
3. Date Organized or Qualified		3a. State of Formation	
02/14/1996		FL	
4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
98-0164939			
5. Date of Last Report		6. Certificate of Status Desired	
N/A		\$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
HKE&F REGISTERED AGENT CORP. 2601 S. BAYSHORE DRIVE SUITE 600 MIAMI FL 33133		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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 <u>Arthur J. Furia</u> Arthur J. Furia, Vice President DATE January 12, 1998 (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	SAMUEL F. INVESTMENT, LIMITED	5332 HIGHWAY #7	WOODBIDGE, ONTARIO

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\*\*\*\*703.75 \*\*\*\*703.75

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 attachment with an address.

SIGNATURE: Samuel Frustaglio December 8, 1997 850-8500

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

Date

Daytime Phone #