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 1997 DIVISION OF CORPORATIONS 97 MAY 16 AM 9:51 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee FILING FEE SECRETARY OF STATE Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 TALLAHASSEE FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT** # L96000000275 1a. Principal Place of Business Address CENTRAL SANTA LUCIA, L.C. % NICOLAS J. GUTIERREZ, JR., ESQ. % NICOLAS J. GUTIERREZ, JR., 🖼 2601 S. BAYSHORE DRIVE, SUITE 1600 2601 S. BAYSHORE DRIVE, SUITE MIAMI FL 33133-MIAMI FL 33133 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 2. Principal Place of Business 03/07/1996 FL4. FE Number Applied For City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired St. 75 Additional Fee Required 8. Name and Address of New Registered Agent 7. Name and Address of Current Registered Agent GUTIERREZ, NICOLAS J JR., ESQ 2601 GOUTH BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133 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 obligation SIGNATURE City, State and Zip Code Managing Members/Managers 10. Title CORAL GABLES FL MGR PEDROSO, VICTOR M 1324 SOPERA AVENUE ARGUELLES, FERNANDO J MGR 1002 ALFONSO AVENUE CORAL GABLES FL MGR SANCHEZ, ALFREDO J 112 BLOOMFIELD W. PALM BEACH FL REYES, GUSTAVO DE L B608 SOUTHWEST 57TH AVENUE MIAMI FL MGR LATOUR, ANTONIO R 6520 LEONARDO STREET CORAL GABLES FL MGR 900002188989--***3456.25 ****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

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

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attachment with an address.