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

FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham **ANNUAL REPORT** Secretary of State 97 MAR 10 PM 12: 35 1997 DIVISION OF CORPORATIONS Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee **FILING FEE** SECRETARY OF STATE TALLAHASSEE, FLORIDA \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #**L9600000724 1a. Principal Place of Business Address REGENT ATLANTIC HOLDING L.C. 3400 COLLINS AVENUE B400 COLLINS AVENUE MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 2. Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address Same 07/08/1996 FL Suite, Apt. #, etc. 4. FEI Number Applied For 65-0605535 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent Name SERVENTI, BRUNO 3400 COLLINS AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33140 Suite, Apt. #, etc. 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_ (Registered Agent Accepting Appointment) (NO1E: Registered Agent signature required when reinstating) **Business Street Address** City, State and Zip Code 10. Title Managing Members/Managers MGR BERVENTI, BRUNO 400 COLLINS AVENUE MIAMI BEACH FL 600002110816--6 -03/12/97--01022--003 ****203.75 ****203.75

11. to 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 of 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 OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Bruno Serventi

INHSE10 R(12-96)

attachment with an address. SIGNATURE: