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 FEB -7 PM 3:44 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 **DOCUMENT #**L96000000788 1a. Principal Place of Business Address VILLA HABANA BIRD ASSOCIATES, L.C. 10481 SW 40TH ST MIAMI FL 33165 .0481 SW 40TH ST MIAMI FL 33165 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 28 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business 07/26/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 65-0684594 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zio Country Zip Country 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent MARQUEZ, FELIX 10481 SW 40TH ST Street Address (P.O. Box Number is Not Acceptable) MTAMI FL 33165 Suite, Apt. #, etc. **40000208**6094---02/13/9**7--**01005--017 ****203**.75** ****203.75 City 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) (NOTE Registered Agent signature required when reinstating) Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title MGR MARQUEZ, FELIX 0481 SW 40TH ST MIAMI FL 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: