File oner before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY & Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY 15 AM 10: 07 FILING FEE | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 | Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company | DOCUMENT # L 91 000000 937 1a. Principal Place of Business Address KANEMAX LIMITED COMPANY 2901 NE 185 TH ST. 2901 NE 185 711 ST N. MIAMI BEACH FL N MIANI BEACH 72 33180 33180 2a. Mailing Address
≥ 90/ NE /85 ST 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business 2901 NE 185 ST 08/30/1996 FL 4. FEI Number Suite, Apl. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 5. Date of Last Report 6. Certificate of Status Desired AVENTURA 7 L.

| 33180 | Country | U.S.A. AVENTURA U.S.A. \$8.75 Additional Fee Hequired 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent SUSIE YEH SUSIC YE-14 Street Address (P.O. Box Number is Not Acceptable) >901 NE 185711 ST. N. MIANI BUACH, FL 33180 AVENTURA 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited flability 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. (Registered Ages As explay Appears on a); (NOTE Registered Ages Sciolate required when reinstating) SIGNATURE ____ Business Street Address Managing Members/Managers 10. Title >901 NE 1885T. AVENTURA. FL 33180 MAM HUAN HUL MANI INICAL FISHU YUZIFI 900002528489-- 5 -05/19/98--01024--013 ****188.75 ****188.75 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.

CHATURE AND INDEPORTED HAME OF SIGNING MANAGING MEMBER OF MANAGER