File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 97 HW 20 TH 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 196000000937** 1a. Principal Place of Business Address KANEMAX LIMITED COMPANY 2901 NE 185TH ST 2901 NE 185TH ST AVENTURA FL 33180 AVENTURA FL 33180 2 Principal Place of Business 2s. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 300 NE 211 ST 08/30/1996 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0734741 Not Applicable NORTH MIAMI BEACH 5. Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Fee Required 05/15/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office YEH, SUSIE YEH, SUSIE 2901 NE 185TH ST Street Address (P.O. Box Number is Not Acceptable) AVENTUA FL 331.80 300 NE Suite, Apt #, etc. 211 ST. Zip Code BEACH 33179 N. MIAMI 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. Thereby accept the appointment registered agent, and accept the obligations. 100002899261--06/09/99--01038--021 SIGNATURE ****188.75 ****188.7\$ (Registered Agent Accepting Appointment). (NOTE: Registered Agent signature region of when roust thin). Managing Members/Managers City, State and Zip Code 10. Title **Business Street Address** MEM TYEH, HUAN KUI 2901 NE 185 STREET AVENTURA FL MEN - YUEL - WEN - HSIU 2901 NE 185 STREET AVENTURA-PL MEM YEH SUSIE HEM LIANG Ming 300 NE 2115T 300 NE 211 ST 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 it 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 Flock 10, or on an attachment with an address SIGNATURE:

IAME OF SIGNAC, MANAGINY I MEMER HIGR MANAGER

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