File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. SECRETARY OF STATE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris DIVISION OF CORPORATIONS ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAR 10 PM 3: 13 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # L96000000970** 1a. Principal Place of Business Address BLOCH & MINERLEY, P.L. 980 N. FEDERAL HIGHWAY 980 N. FEDERAL HIGHWAY SUITE 205 SUITE 205 BOCA RATON FL 33432 BOCA RATON FL 33432 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 09/16/1996 FLSuite, Apl. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0696398 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 03/09/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BLOCH, STUART E 980 N. FEDERAL HIGHWAY SUITE 205 Street Address (P.O. Box Number is Not Acceptable) BOCA RATON FL 33432 -03711799--01089--017 Suite Apt #, etc. ****1881.75 ****1681.78 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 aftermative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE _ ____ DATE (Register of Agent Accepting Appendicus). (Nottle Registered Agent signation required when the of the a 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM BLOCH, STUART E 6268 VIA PALLADIUM BOCA RATON FL MGRM MINERLEY, KENNETH L 738 PEACH TREE LANE BOCA RATON 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 of 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

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