File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 10 EPR 23 FH 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE MARYN GARRA Name and Mailing Address of Limited Liability Company **DOCUMENT # L96000001098** 1a. Principal Place of Business Address 668 NW 62ND ST, L.C. 419 W. 49TH ST. #106 419 W. 49TH ST. #106 HIALEAH FL 33012-3602 HIALEAH FL 33012 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 10/16/1996 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0704461 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Required 04/24/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name 7800 NE 2ND AVE, L.C. 419 W. 49TH ST. #106 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FT 33012 500002859585---Suite, Apt #, etc -04/30/99--01147--003 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE _____ DATE _ (Registered Agent Assepting Approximated). (Not be fregistered Agent Scientific in a low express of 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code FISHER, RONALD P MGR 1801 CENTURY PARK E., #240 LOS ANGELES CA 90067 MGR FISHER, JAMES Q 1801 CENTURY PARK E., #240 LOS ANGELES CA 1801 CENTURY PARK E., #2400 LOS ANGELES CA MGR FISHER, RICHARD J 11. Edo 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 truster empowered to execute this report agreeouired by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

attachment with an address.

SIGNATURE:

INHSE10 R (12-98)

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