File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED 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 MAR -9 PM 12: 24 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#** L96000001139 1a. Principal Place of Business Address E & W AMERICA, L.C. 3051 SPERFERD AVERUE 80 SW 8TH ST. STE 2077 MTAMT PT 031-33 MIAMI FL 33130 2. Principal Place of Business Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 905W. 874.57. Sulte, Apt. #, etc. 10/28/1996. Suite, Apt. #, etc. SUITE 2077 Applied For City & State City & State Not Applicable 65-0709316 Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Lee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent Name AGRAMUNT, LUIS Street Address (P.O. Box Number is Not Acceptable) 80 SW 8TH ST. STE 2077 MIAMI FL 33130 Suite, Apt. #, etc. Zip Code FL 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 DATE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM ESCAMILLA, ENRIQUE 80 SW 8TH ST. STE 2077 MIAMI FL MGRM WALKATTE, ALIDA 80 SW 8TH ST. STE 2077 MIAMI FL 20b002456712---3 |-03/13/38--01070--015

11. Ido 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 accuracy 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 trustes ampowered 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: