File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. PILETT 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 -2 AM 8: 26 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT #** L9600001228 1a. Principal Place of Business Address ECIB PALM BEACH LLC 3 EAST 54TH STREET 3 EAST 54TH STREET **SUITE 1265 SUITE 1265** NEW YORK NY 10022 NEW YORK NY 10022 2. Principal Place of Business 2a. Malling Address 3. Date Organized or Qualified | 3a. State of Formation 313 1/2 WORTH 11/22/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State Not Applicable 65-0716000 5. Date of Last Report 8. Certificate of Status Desired Zip Country \$8.75 Additional Fee Required <u>03/10/1997</u> 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name UNITED CORPORATE SERVICES, INC. 801 NORTHEAST 167TH STREET Street Address (P.O. Box Number is Not Acceptable) NORTH MIAMI BEACH FL 33162 Suite, Apt. #, etc. City 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code MEM RUGGERI8, ROBERTO 3 EAST 54TH ST., SUITE 126 NEW YORK NY MEM SA, DELANEY BOULEVARD ROYAL, B.P. 7 L-2017 LUXEMBOURG MEM SA, SALER 4, BOULEVARD ROYAL, B.P. 7 L-2017 LUXEMBOURG 800002452128---O -03/10/98--01042--021 ****188.75 ****188.7S 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 accurate and that thy 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 as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

SIGNATURE:

INHSE 10 R (12-97)