File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. for the first LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 98 APR 16 PH 1:06 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee STORE LARLY LA TALLAHASSEE. FLORIDA \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L96000001244 1a. Principal Place of Business Address FRESMAR INTERNATIONAL, L.C. 1376 N.W. 78 AVENUE MIAMI FL 33126 1376 N.W. 78 AVENUE MIAMI FL 33126 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 11/27/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0710629 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country Zip \$8.75 Additional Lee Required 04/07/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name CORPORATE ACCESS, INC. 1116-D THOMASVILLE ROAD Street Address (P.O. Box Number is Not Acceptable) MOUNT VERNON SQUARE TALLAHASSEE FL 32303 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 **Business Street Address** Managing Members/Managers City, State and Zip Code MGR FRANCO, CARLOS 1376 N.W. 78 AVENUE MIAMI FL 900002498749--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 or 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

TRAVCO 3-19-97

MEMBER OR MANAGER Date

Daytime Phone #

n. 1

attachment with an address.

SIGNATURE: