File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** 98 MAR 10 PM 3: 39 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L96000001258 1a. Principal Place of Business Address BROWARD SQUARE L.C. 121 E. BROWARD BLVD. 121 E. BROWARD BLVD. SUITE 200 SUITE 200 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 12/03/1996 4. FEI Number Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 65-0711967 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Bequired 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent LEONHARD KURTEN IBC FIDUCIARY INC., Street Address (P.O. Box Number Is Not Acceptable) 444 BRICKELL AVE. SUITE 51-246 121 E. BROWARD BLVD Suite, Apt. #, etc. MIAMI FL 33131 SUITE 200 Zip Code FORT LAUDERDALE 33301 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 his 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. Celler LEONHARD KURTEN 3/9/98 SIGNATURE 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM KURTEN, LEONHARD VILLA SAN MICHELLE 153 ALU 83700 BOULOURIS, FRA MGRM INTER-INVEST-LTD. 121 E BROWARD BLVD. SUITE FORT LAUDERDALE FL INTER INVEST PROPERTIES LTD 11. Ido hereby certify that the information supplied with this filing do 9 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SI

CLUCIE LEONHARD KURTEN

3/9/98 (954)462-0061