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 FHED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAY -3 PH 1:00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Salyhdi Millian Sins Name and Mailing Address of Limited Liability Company TALLAHASSEE, FLORIDA **DOCUMENT #** L97000000142 1a. Principal Place of Business Address MEGA LIGHTING, L.L.C. 4219 MELALEUCA LANE 4219 MELALEUCA LANE LAKEWORTH FL 33461 LAKEWORTH FL 33461 2 Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 02/04/1997 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0723911 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zιρ Country Country \$8.75 Additional Fee Required 05/01/1998 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent GAJZENBERG, RICARDO 4219 MELALEUCA LANE Street Address (P.O. Box Number is Not Acceptable) LAKEWORTH FL 33461 Suite, Apt. #, etc. Zip Code 9. Pusuant 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 redistered 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 repistered agent, and accept the obligations SIGNATURE _ (Read-fool Agent All Expling Approximent). (NPTL If a 2-rect Agent Squador Billion Cable 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 4235 MELALEUCA LANE D GAJZENBERG, RICARDO LAKEWORTH FL D MEJIA, GERMAN D 4219 MELALEUCA LANE LAKEWORTH FL -05/11/99--01093--01 11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as it 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

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attachment with an address SIGNATURE: