File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPÄRTMÄNT OF STATE Sandre B. Mortham LIMITED LIABILITY COMPANY & ANNUAL REPORT 1998 Secretary of State DIVISION OF CORPORATIONS 98 MAY 28 PH 3: 14 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#** L97000000264 1a. Principal Place of Business Address ALADIN FOOD & BEVERAGE, L.L.C. 2572 ROBERT TRENT JONES DRIVE 2572 ROBERT TRENT JONES DRIV #1236 ORLANDO FL 32835 ORLANDO FL 32835 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation MRLAMOD Applied For 59-3433131 Not Applicable 6. Certificate of Status Desired Country 58 75 Additional Fee Beguired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Street Address (P.O. Box Number la Not Acceptable) WOLFE, LARRY 200-A JOHN KNOX ROAD TALLAHASSEE FL 32303 1600 Zip Code 32801 RLANDO 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 of registered dent, 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 following. SIGNATURE ed Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR HOPPS, ALAN C 2572 ROBERT TRENT JONES DR ORLANDO FL MGR HOPPS, RONALD R PRADO NORTE 530-201 MEXICO D.F. 11000 ME 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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: ALAN C. Hopps