File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FILED SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 JUL 13 AM 8: 37 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company DOCUMENT # L9700000586 JASAR INTERNATIONAL, L.C. 1a. Principal Place of Business Address 8649 N. HIMES AVE, #809 Tampa, FL 33614 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 8649 N. HIMES NVE 8649 N. HIMES AUE. FLORIDA MAY 27, 1997 <u> Suite</u> 809 Applied For City & State 59-3478242 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country NIA \$8.75 Additional Fee Regulred 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office NILESH M. DATEL VANESA Street Address (P.O. Box Number is Not Acceptable) 609 W. DELEON ST. 864.9 Suite, Apt. #, etc. UMES TAMPA, FL 33606 #809 City Zip Code AMPA 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, Jante State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE spishered Agent Accepting Appointment). (NOT). Registered Agent signature required when reinstating) **Business Street Address** 10. Title Managing Members/Managers City, State and Zip Code 8649 N. HIMES AVE # 809 Member Tampa, FL 33614 JAY VANESA SARJU R. PATEL Member 78 Berkeley Court London, UK Glentworth Street NKI SHQ 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 my signature shall have the same legal effect as if made under eath; 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

SIGNATURE AND TYPE O ORDRINGED NAME OF SIGNING MANAGING MEMBER OR MANAGER

JAY VANCED

6-15-98 813-915-0186

attachment with an address.

SIGNATURE: