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 ANNUAL REPORT Secretary of State 1999 11114 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Pavable To: FLORIDA DEPARTMENT OF CASE Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** 197000000802 1a. Principal Place of Business Address JACO COMPANY, L.C. OF SOUTH FLORIDA 6811 RIVIERA DRIVE 6811 RIVIERA DRIVE CORAL GABLES FL 33146 CORAL GABLES FL 33146 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 07/24/1997 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FET Number 1998 Applied For City & State City & State APPLIED FOR Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zin Country Zip Country \$8.75 Additional Fee Required 09/02/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office HINDS, LEONARD F JR 6811 RIVIERA DRIVE Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 Suite, Apt. #, etc. 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. DATE _ (Big gistered Agent Accepting Appear times). (NOTE: Big several Agent signature responsed when remotition) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM HINDS, LEONARD F JR 6811 RIVIERA DRIVE CORAL GABLES FL MGRM HINDS, JACQUELYN B 6811 RIVIERA DRIVE CORAL GABLES FL 200002794552---4 -03/04/99--01065--<u>0</u>05_ ****188.75 ****188.75 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. 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 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 the report as required by Chapter 608. Florida Statutes; and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: