File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Ell ED **Katherine Harris** ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 30 MIN 18 AM 10: 38 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE TALLA I MUSEL FLORIDA Name and Mailing Address
In Limited Liability Company **DOCUMENT # 197000000894** 1a. Principal Place of Business Address BROKER BENEFIT CONSULTANTS, L.C. 904 NORTH ORANGE AVENUE 904 NORTH ORANGE AVENUE ORLANDO FL 32801 ORLANDO FL 32801 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 08/14/1997 FLSuite. Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 53-34 Applied For City & State City & State APPLIED FOR Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Ζıρ Country Ζφ Country 04/08/1998 \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office WATKINS, W W 904 NORTH ORANGE AVENUE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 Suite, Apt. #, etc. Zio Code 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. SIGNATURE DATE \_ (Registered Agent Accepting Appointment, INOTE Registered Agent signature respired when recording 10, Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR 951 LEIGH STREET WATKINS, W W ORLANDO FL 400002888874---05/27/99--01030--006 \*\*\*\*188.75 \*\*\*\*188.75 ARR 24 .... 11 Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If 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 Blick 10, or on an

SKINATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER OR MANAGED.

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**SIGNATURE:**