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 FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 20 AM 10: 11 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT #** 19700001210 REGENT CIRCLE, L.L.C. 1a. Principal Place of Business Address 280 PARK AVENUE, EAST BUILDING, 20TH FLOOR 280 PARK AVENUE, EAST BUILDI NEW YORK NY 10017 NEW YORK NY 10017 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 10/30/1997 FI. Suite, Apt. #, etc Suite, Apt. #, etc. 4. FEI Number Applied For 13 3883849 13 - 3977332 5. Date of Last Report City & State City & State Not Applicable 6. Certificate of Status Desired Zip Country Źιο Country 03/19/1998 \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PIANTATION FL 33324 Suite, Apt #, etc City Zin 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE _ ... DATE (Registered Asport Assembling Approximate). (Notify the patient Asports specimens presented as a strong 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code REGENCY GREEN NATION, MGRM 280 PARK AVENUE, EAST BUIL NEW YORK NY 200002853662--\$ -04/27/99--01073--006 ****188.75 ****188.79 11 🖟 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i), Florida Statutes. Horther 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.

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SIGNATURE: