File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra C: Mortham FILED **ANNUAL REPORT** Secretary of State 1998 **DIVISION OF CORPORATIONS** 98 MAR 12 PN 14: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETE LES PARENTES DE LA CENTRA DEL CENTRA DE LA CENTRA DEL CENTRA DE LA CENTRA DEL CENTRA DE LA CENTRA DE LA CENTRA DE LA CENTRA DEL CENTRA DE LA Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000001239 1a. Principal Place of Business Address 10101 BAY ASSOCIATES, L.C. C/O CREST MANAGEMENT SERVICES, INC. C/O CREST MANAGEMENT SERVICE 10800 BISCAYNE BLVD., #400 10800 BISCAYNE BLVD., #400 MIAMI FL 33161 MIAMI FL 33161 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 11/05/1997 4. FEI Number FL Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 65-0790430 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country S8 75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent MELAND & RUSSIN, P.A. Street Address (P.O. Box Number la Not Acceptable) 2420 FIRST UNION FINANCIAL CENTER 000002459420--200 SOUTH BISCAYNE BLVD. -03/17/98--01048--008 ****188.75 ****188.75 Sulte, Apt. #, etc. MIAMI FL 33131 City Zip 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. (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** MGRM GOLDSTEIN, STUART D 10800 BISCAYNE BLVD. #400/ MIAMI FL MGRM FEDER, ERIC M 10800 BISCAYNE BLVD. #400/ MIAMI FL MGRM ROSENBERG, RYAN 10800 BISCAYNE BLVD. #400/ MIAMI FL MGRM ROSENBERG, CHARLES 10800 BISCAYNE BLVD. #400/ MIAMI FL 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 employee do to effect 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Oaytime Phone ₩

SIGNATURE: