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 FILED Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAR 19 PM 3: 39 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT #** L9700001247 1a. Principal Place of Business Address BENCORP INTERNATIONAL LIMITED COMPANY 23 SOUTH 3RD 23 SOUTH 3RD FERNANDINA BEACH FL 32034 FERNANDINA BEACH FL 32034 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 11/07/1997 4. FEI Number Suite, Apt. #, elc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country SB-75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office HARGROVE, ERIC HARGROVE, ERIC Street Address (P.O. Box Number is Not Acceptable) 2248 NORTHWEST 5TH PLACE SOUTH GAINESVILLE FL 32603 Suite, Apt. #, etc. Zip Code FERNANDINA BEACHFL 32034 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 as registered agent, and accept the obligations. SIGNATURE_ DATE _ (Registered Agent Accepting Appeniment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM COHN, YEHUDAH BENJAM 393 WEST END AVENUE, SUITE NEW YORK NY (0024 11. I do hereby certify that the information supplied with this filling 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 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.

SIGNATURE: