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 B. Mortham FILED **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS os app - s PH 😼 60 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000001265 1a. Principal Place of Business Address AMERICAN AGENCY L.C. 8410 NW 53RD TERRACE, SUITE 218 8410 NW 53RD TERRACE, SUITE MIAMI FL 33166 MIAMI FL 33166 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 8420 11/10/1997 Applied For City & State Not Applicable 6. Certificate of Status Desired Zip Country USA \$8.75 Additional Fee Beguired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name RIEGO, EDUARDO DEL Street Address (P.O. Box Number is Not Acceptable) 8410 NW 53RD TERRACE, SUITE 218 MIAMI FL 33166 <u>500002480975</u> Suite, Apt. #, etc. -04/07/98 --01046 --023 \*\*\*\*197.50 \*\*\*\*197.50 Zip Code City 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) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR RIEGO, EDUARDO DEL 3351 SW 110TH COURT MIAMI FL 11. I do hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(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.

305-470-5697

SIGNATURE: