2<sup>nd</sup> and File on or before Sept. 29, 1999 or Limited Liability Company FINAL NOTICE: will be dissolved. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED W8/10 Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 AUG -9 AM 9: 44 FILING FEE Annual Report \$100.00 + \$88.76 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE \$ 588.75 Name and Malling Address of Limited Liability Company TALLAHASSEE FLORIDA **DOCUMENT #** L9700001425 1a. Principal Place of Business Address DESTINY YACHTS, L.C. 401 S.W. 13T AVENUE 401 S.W. 1ST AVENUE FORT LAUDERDALE FL 33301-FORT LAUDERDALE FL 33301-2. Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 2001 SW 20015W 12/22/1997 FL 4. FEI Number Applied For 65-0809869 Not Applicable APPLIED FOR 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required USA 03/16/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office MAASS, ROBB R ALLEY, MAASS, ROGERS & LINDSAY, P.A. Street Address (P.O. Box Number is Not Acceptable) 321 ROYAL POINCIANA PLAZA PALM BEACH FL 33480 Suite, Apt. #, etc. 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) (NOTF: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers City, State and Zip Code **Business Street Address** MGR WEINER, EDWARD G 600 GOLDEN HARBOR DRIVE BOCA RATON FL SANDERS, O. THOMAS MGR <del>110-N:-DIXIE-HIGHWAY</del>-STUART-FL-MER LECZYNSKI, JANUSZ Ft. Lauderdale, Fl 2001 SW 20th ST. 20|0002962432---| -08/17/99--01071--005 \*\*\*\*588.75 \*\*\*\*588.75 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. Hurther certify that the information indicated on this annual report is true and accurate and the many 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 of trustee empressed to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an action the contract. limited liability company or the receiver of attachment with an address. SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER