


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 MAY -4 PM 4:16

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| LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 |  | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L98000000027

PATRICIA TOBON, L.C.
1 2000 BISCAYNE BLVD., SUITE 220
MIAMI, FL 33181

1a. Principal Place of Business Address
C/O PATRICIA TOBON, L.C.
5401 COLLINS AVENUE, SUITE 914
MIAMI BEACH, FL 33140

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| 2. Principal Place of Business 5401 COLLINS AVENUE Suite, Apt. #, etc. SUITE 914 City & State MIAMI BEACH, FL Zip 3 3140 Country USA | 2a. Mailing Address SAME Suite, Apt. #, etc. City & State Zip Country | 3. Date Organized or Qualified 01/02/98 4. FEI Number 65-0830106 5. Date of Last Report | 3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/> |
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| 7. Name and Address of Current Registered Agent F ELDENKRAIS, MICHAEL ESQ. C/O MICHAEL FELDENKRAIS, PA 1 2000 BISCAYNE BLVD., SUITE 220 MIAMI, FL 33181 | 8. Name and Address of New Registered Agent/Office Name JORGE E. OYARCE C/O JE OYARCE & ASSOCIATES Street Address (P.O. Box Number is Not Acceptable) 199 SW 12TH AVENUE Suite, Apt. #, etc. SUITE 11 City MIAMI Zip Code 33130-1056 FL |
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9. Pursuant to the provisions of Sections 608.16 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 04/28/99

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| 10. Title MGRM | Managing Members Managers TOBON, PATRICIA | Business Street Address 5401 COLLINS AVENUE, SUITE 914 | City, State and Zip Code MIAMI BEACH, FL 33140 |
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11. I 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. 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:  PATRICIA TOBON (MGRM) 04/28/99 305-861-4956