File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT FILED Secretary of State
DIVISION OF CORPORATIONS 1999 99 APR 20 AM 10: 12 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRÉTARO EL NEGLES TATLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT # 198000000734** 1a. Principal Place of Business Address NOBLE HOUSE MARITIME CHARTERS, L.C. 100 S.E. SECOND STREET, 17TH FLOOR MIAMI FL 33131 100 S.E. SECOND STREET, 17TH MIAMI FL 33131 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 06/05/1998 FI. Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 65-0840439 City & State City & State Not Applicable 6. Certificate of Status Desired Country Žip Country Zip \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BROWN, MORTON P 100 S.E. SECOND STREET, 17TH FLOOR Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 Suite, Apt. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE \_ (Registered Agent Accepting Appointment) - (f.OTE) Registered Agent signature registed when reinstatings City, State and Zip Code **Business Street Address** Managing Members/Managers 10. Title 678 Woodcrest Rd. Key Biscayne, Fl 33149 MGRM SILVERMAN, ERIC 200002854292-04/27/99-01100-011 \*\*\*\*188.75 \*\*\*\*188.75 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. If unher certify that the information inc cated 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

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**SIGNATURE:**