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 FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 FEB 24 JL 9: 55 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SEC. TALLA CORRESPONDA Name and Mailing Address
of Limited Liability Company **DOCUMENT # 198000000822** 1a. Principal Place of Business Address THE MENTOR CENTER, L.C. 10245 COLLINS AVENUE, SUITE 15E 10245 COLLINS AVENUE, SUITE BAL HARBOUR FL 33154 BAL HARBOUR FL 33154 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address 2 Principal Place of Business 06/18/1998 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number EIN Applied For City & State City & State 65-0843196 Not Applicable 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office ANGELL CORPORATE SERVICES, INC. 250 ROYAL PALM WAY, SUITE 300 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 Suite Ant #. 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. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Ageri Accepting Appairment). (YENE Registered Agerits gratine impared who in and from **Business Street Address** City, State and Zip Code 10. Title Managing Members/Managers MGRM EVANS, THOMAS W 10245 COLLINS AVENUE, SUIT BAL HARBOUR FL Ac c filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. If urther certify that the information that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the wered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an indicated on this annual report is true and aclimited liability company or the receiver or tr attachment with an address-THUMAS W. EVANS 2/18/99 305-867-1400 SIGNATURE:

INHSE10 R (12-98)