File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS <- Min 23 PH 5/ 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000001084 1a. Principal Place of Business Address KDJM, L.L.C. 139 EXECUTIVE CIRCLE, SUITE 201 139 EXECUTIVE CIRCLE, SUITE DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 07/13/1998 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State .59-3524*65*0 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country SB 75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name A.G.C. 00., 200 SOUTH ORANGE AVE. Street Address (P.O. Box Number is Not Acceptable) 2300 SUN BANK CENTER ORIANDO FL 32801 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 _... DATE tRegistered Agent Accesting Appointments. (NOTE Beg Seriel Agent signal in responsitives receive City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** MGR. REAM, KEVIN 654 MARINA POINT DAYTONA BEACH FL MGR NEUBAUER, DAVE 487 JOHN ANDERSON DRIVE ORMOND BEACH FL MGR NCCARTHY, JOE 1401 SOUTH PALMETTO AVE., DAYTONA BEACH FL 2d0002856802---\$ 04/29/99-01093--012 *******1**88.75 11. Too 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 hability 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

SUBJECT MANAGER OF MERCES RECORDANCES RE

1032 Marie Physica #

SIGNATURE:

INHSE10 R (12-98)