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 LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 APR 22 PM 2: 16 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 198000001166** 1a. Principal Place of Business Address BELSTAR EXPORT IMPORT LC 1220 NORTH MARKET STREET, SUITE 606 1220 NORTH MARKET STREET, SU WILMINGTON DE 19801 WILMINGTON DE 19801 2 Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 09/17/1998 FLSuite. Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 6. Certificate of Status Desired 5. Date of Last Report Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BOULEVARD #211 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 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. DATE (Registered Agent Accepting Appear ment). (NOTE: Registered Agent signature required when remistating 10. Title **Business Street Address** City, State and Zip Code Managing Members/Managers MGR GRASSICK, JAMES W LA CLOSETTE SARK CHANNEL ISLANDS MGR ELMONT, SIMON P LA FREGONDEE SARK CHANNEL ISLANDS 4mnnn2852554----04/27/99--01018--001 ***4941,25 ****188,75 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. Janet CAruccio, Attorney-in-fact for Simon P. PATURE AND THE ELOGRAPHICAL JAME OF SHAPE Elmont,

IAME OF SIGNING MANAGING MEMBER OF MANAGER

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SIGNATURE: