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 MAR 15 AM 10: 41 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SEGRETARY OF STATE TALLAHASSEE, FLORIDA **DOCUMENT # L98000001688** 1a. Principal Place of Business Address FERPAD PROPERTIES, L.L.C. 13730 STATE RD. 84, SUITE 304 13730 STATE RD. 84, SUITE 30 DAVIE FL 33325-5304 DAVIE FL 33325 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 09/02/1998 FL Suite, Apt. #, etc. Suite, Apt #, etc 4. FEI Number Applied For 65-0860412 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office PADILLA, JAVIER B 906 S.W. 113TH TERRACE Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33025 <u>900000281459</u> -03/22/99--01157 ****188.75 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 Assepting Appendix on) (NOTE Registered Agent Signature in Josephotos, new tre- qu **Business Street Address** City, State and Zip Code 10. Title Managing Members/Managers FERRUCHO, JUAN CARLOS MGR 13730 STATE RD. 84, SUITE DAVIE FL MGR PADILLA, JAVIER E 13730 STATE RD. 84, SUITE DAVIE FL 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), Fiorida 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. M SIGNATURE:

ing promande de pictor i por en aprazador en elembro de comenciar a de

L ADD TYPLU DE

INHSE10 R (12-98)