File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEFARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR 12 PH 2: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** TALLAHASSEE, FLORIDA L98000002166 1a. Principal Place of Business Address FLORIDIAN MARITIMES, L.L.C. 17760 FIELDBROOK CIRCLE 17760 FIELDBROOK CIRCLE BOCA RATON FL 33496 BOCA RATON FL 33496 2 Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address 10/07/1998 . 4. FEI Number Suite, Apt #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office SCHAUM, MARK A Street Address (P.O. Box Number is Not Acceptable) 2300 CORPORATE BOULEVARD, SUITE 137 300002814313---6 -03/22/99--01148--002 BOCA RATON FL 33431 ****188.75 ****188.7S 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. (Registered Agent Accepting Aphionoment) (INCE), forgulared Agents grandle required when you discoun-Managing Members/Managers 10. Title **Business Street Address** City, State and Zip Code MGRM WOLLSTEIN, EDWARD 17760 FIELDBROOK CIRCLE BOCA RATON FL 17760 FIELDBROOK CIRCLE MGRM WOLLSTEIN, CYNTHIA BOCA RATON FL

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. 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.

SIGNATURE:

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