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** ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 20 AH 10: 14 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002254 1a. Principal Place of Business Address WELBRO/E-D CONSULTANTS, LLC 800 TRAFALGAR COURT, #200 800 TRAFALGAR COURT, #200 MAITLAND FL 32751 MAITLAND FL 32751 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 10/14/1998 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3536817 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip 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 A.G.C. CO., Gary E. Brown
Street Address (P.O. Box Number is Not Acceptable) 200 S. ORANGE AVENUE, SUITE 2300 800 Trafalgar Court ORLANDO FL 32801 Suite, Apt #, etc Suite 200 Zip Code 32751 Maitland 608.4/6 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing 9. Pursuant to the provisions of Section its registered office or registered a n 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 to SIGNATURE DATE prominent). (NOTE: Biograficed Agent's quature required when reinstations 10. Title **Business Street Address** City, State and Zip Code MGR WELBRO CARIBBEAN, INC. 800 TRAFALGAR COURT, #200 MAITLAND FL Ellis-Don Construction MM Inc. 3100 Medlock Bridge Rd. Norcross, GA 30071-1439 100002854021--- 8 -04/27/99:-01089:-013 ****188.75 ****188.75 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 riade under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to effect the report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address OACIBBEN, (407)475-0800 SIGNATURE: ~

Timothy

Pipkorn

Sec/Treas

INHSE10 R (12-98)