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 29 PM 1: 22 FILING FEE | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECKÉTANY OF STALL TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000002453 1a. Principal Place of Business Address BULKTAINER PROPERTIES, L.L.C. 3111 UNIVERSITY DRIVE, SUITE 1000 3111 UNIVERSITY DRIVE, SUITE CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 10/28/1998 -Suite, Apt. #, etc. Suite, Apt. #, etc. FL. Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Žiρ Country Country Zio \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office RAFFERTY, WILLIAM L JR. 1101 BRICKELL AVENUE, SUITE 1400 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 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 IGNATURE DATE (Registere Lagran Ancepting Application of) (IHOTE Hegisteries Agent signature in government when re-character 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR SARGEANT BULKTAINERS, 3111 UNIVERSITY DRIVE, SUI CORAL SPRINGS 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. Hurther 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 trystee empowerer 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 AND TYPED OR FEBRU TO NAME OF SERVING MANAGERS MEMBER CHEMANAGERS

INHSE10 R (12-98)

SIGNATURE: