File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE What I had been a Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS OFFIT 22 TH 3: IA FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000003180 1a. Principal Place of Business Address GERSON GENERAL PARTNER, L.C. 1<del>501 CRESCENT CIRCLE</del> 1501 CRESCENT CIRCLE MAKE PARK FI 33403 LAKE PARK FL 33403 2 Principal Place of Business

367 GLENBROOK DRIVE 367 GLENBROOK DRIVE
Suite, Apt. #, etc. 3. Date Organized or Qualified 3a. State of Formation 12/15/1998 4. FEI Number Applied For City & State ANTIS, FL.

PTL ANTIS, FL.

20221162 Country
LI, S. 1 65-0880906 LANTIS FL. Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name THEODORE F. GERSON KTG&S REGISTERED AGE, NT CORPORATION Street Address (P.O. Box Number is Not Acceptable)
367 GLENBROOK DRIVE 100 SOUTHEAST 2ND STREET, SUITE 3800 MIAMI FL 33131 Zip Code 多3*4ら*名 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 appent the obligations DATE FEB. 18, 1997 nodon Jumon SIGNATURE. (Registered Agent Accepting Appropriational) (NOTE: Registered Agent signalize required when recording) 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code 1501 CRESCENT CIRCLE
367 GLENBROOK DRIVE MGR GERSON, THEODORE F LAKE PARK FL ATLANTIS, 800002788698---02/26/99--01072--011 \*\*\*\*188.75 \*\*\*\*188.75<u>]</u> 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. SIGNATURE: