File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

subject to a \$ 40	JU.UU LATE FEE.	<u> </u>			7			
LIMITED LIABILIT ANNUAL R 199	Kat Sec	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			FILED			
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee								
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address DOCLIMENT # 7.00000000000000000000000000000000000					STORETARY OF STAIL			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000003238								
CYPRESS SPRINGS VILLAGE S, LLC 11 CHURCH STREET, SUITE 200 TORONTO ONTARIO CANADA M5E -1W1					1a. Principal Place of Business Address 11 CHURCH STREET, SUITE 200 TORONTO ONTARIO CANADA M5			
2 Principal Place of Bus	2a. Mailing Address			3. Date Organized or Qualified 3a. State of Formation			Formation	
11 Church Street	11 Church Street			12/15/1998		FL		
Suite, Apt. #, etc.		Suite, Apt #, etc.			4. FEI Number		·	
Suite 200 City & State		Suite 200 City & State			4		İX	Applied For
Toronto, Ontario		Toronto, Ontario		98-019		-		Not Applicable
Zip	Country	Z _I p	Count	ry	5. Date of Last Re	pport 6. Certificate of Sta		
M5E 1W1	CANADA	M5E 1W1	CAN	ADA	N/A		S8 75 Additiona	al Fee Required
7. Name	and Address of Current I	Registered Agent		Name _	Name and Address	of New Regis	tered Agent/Of	fice
A.G.C. CO., 200 SOUTH ORANGE AVF., SUITE 2300 ORJ.ANDO FL 32801 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statilits registered office or registered agent, option, in the State of Florida Such charges				Street Address (F 14237 L Suite, Apt #, etc City ORLAND	liability company submits this statement for the purpose of changing			
as registered agent, and accept the obligations SIGNATURE SIGNATURE Registred Agent Agent Accept Large or the High and Agent Signature required when registrating					ı, "	ATE 3/	1/99	?
10. Title Managing Members/Managers			Business Street Address			City, State and Zip Code		
MGRM CYPRES	S SPRINGS V	ILL, 11 CH	IURCH	STREET,	SUITE 20	16 (10 16 12 - 64 26	2 834 9 7 99—111	RIO CANA 1 [][3] [][04009 ****188.79
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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. If urther 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.

A BLICE AND STREET WHICH CHEMADYS HE

FEB. 22, 1999 (416) 861-5753

(Lightse Pitorio #

SIGNATURE: RUSSELL JACOBSON
SIGNATURE AND TYPE D ON PRINTED IN