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 FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 FEB 22 AM 8: 59 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE. TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000003362 1a. Principal Place of Business Address LEGAL DRAFTING, L.L.C. 92 LAKE WIRE DRIVE 92 LAKE WIRE DRIVE LAKELAND FL 33815 LAKELAND FL 33815 2. Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 12/23/1998 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number ✓ Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office KOREN, EDWARD F 92 LAKE WIRE DRIVE Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33815 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. SIGNATURE (Riegistered Agent Accepting Appointment) (NOTE Registered Agent signature required when ministrating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR KOREN, EDWARD F 92 LAKE WIRE DRIVE LAKELAND FL 800002789218---02/26/33--01100--003 ****188.75 ****188.7S 2.25-99 11. I do hereby certify that the information supplied with this filling 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 it made under oath, that I am a managing member or manager of the

limited liability company or the receiver or trusteg empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an

Edward F. Koren 2/17/99 941-499-5314

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SIGNATURE: