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 Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR 16 PK 4: 32 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Sconlinks or Spile TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT # M96000000146** 1a. Principal Place of Business Address WESTMINSTER FIDELCO, L.L.C. 225 MILLBURN AVENUE, SUITE 202 225 MILLBURN AVENUE, SUITE 2 MILLBURN NJ 07041 MILLBURN NJ 07041 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 04/26/1996 NJ Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 22-3420501 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 04/09/1998 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 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. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (INOTE Registered Agent signal/de required when reinst long) City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** 981 ROUTE 22 MGRM KUSHNER, MURRAY BRIDGEWATER NJ 225 MILLBURN AVENUE, SUITE MILLBURN NJ MGRMÌ BERSON, MARAC E **იძიიიგცვი710--\$** -n3/26/99--01115--030 ****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 made under oath, that I am a managing member or manager of the limited liability company or the receive por hystee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an SIGNATURE:

ELO OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER.

INHSE 10 R (12-98)