File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.



FILED

|  | ANNUAL REPORT 1998    |                                     |                | Sandra B. Mo<br>Secretary of S<br>DIVISION OF CORP |                                       | o <b>rtham</b><br>State | SECRETARY OF STATE DIVISION OF CORPORATIONS  98 MAR -5 PM 12: 40 |  |                      |  |  |
|--|-----------------------|-------------------------------------|----------------|--|---------------------------------------|-------------------------|--|--|----------------------|--|--|
| FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee   |                       |                                     |                |  |                                       |                         |  | OTIAN O                                    | 1 11 156             | 70                                       |  |
| \$ 188.75   Make Check Payable To: FLORIDA DEPARTMENT OF  1. Name and Mailing Address of Limited Liability Company   DOCUMENT # M960000002   |                       |                                     |                |  |                                       |                         | 1a. Principal Place of Business Address                          |  |                      |  |  |
| SATTEL STREAMRAMP, LLC<br>26035-MURENT-DOAD<br>CALABASAS CA-91302  |                       |                                     |                |  |                                       |                         | 26025 MUREAU ROAD<br>CALABASAS CA 91302                          |  |                      |  |  |
| 2. Principal Place of Business 2s. Maili   |                       |                                     |                | ing Address  |                                       |                         | 3. Date Organiz  | ed or Qualified                            | 3a. State            | of Formation                             |  |
|  |                       |                                     |                | P.O. Box 6699                                      |                                       |                         | 07/15/1996 NV  |  |                      |  |  |
| Sulte, Apt. #, etc.  |                       |                                     | Suite, A       | suite, Apt. #, etc.                                |                                       |                         | 4. FEI Number Applied For  |  |                      |  |  |
| City & State   |                       |                                     | City & S       | City & State                                       |                                       |                         | ┨<br>┨   |  |                      |  |  |
| Westlake Village, CA   |                       |                                     | Thousand Oaks, |  |                                       | CA                      | 95-4584<br>5. Date of Last I                                     |  | O Cardilla           | Not Applicable                           |  |
| Žip  | <del></del>           | Country                             | Zip            |  | Count                                 |                         | 5. Date of Last (  | пөроп                                      |                      | ate of Status Desired                    |  |
| 9136   |                       | USA                                 | 9135           | •  | US                                    |                         | 03/17/1  |  |                      | لــا سيون                                |  |
|  | 7. Nam                | e and Address of Current F          | d Agent        |  | 8. Name and Address of New Registered |                         |  | tered Agen                                 | i/Office             |  |  |
| 526 I  | E. PAR                | CES, INC.<br>K AVENUE<br>E FL 32301 |                |  |                                       |                         | P.O. Box Number is Not Acceptable)                               |  |                      |  |  |
|  |                       |                                     |                |  | Sulte, Apt. #, etc.                   |                         |  |  |                      |  |  |
|  |                       |                                     | City 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  |                       |                                     |                |  |                                       |                         |  | DATE                                       |                      |  |  |
| 10. Title Managing Members/Managers  |                       |                                     |                | (NOTE Registered Ag                                | Business Street Address               |                         |  | City                                       | State and 7          | /in Code                                 |  |
| INC. THE METERAL METER |                       |                                     |                | <u> </u>   |                                       |                         |  | City, State and Zip Code                   |                      |  |  |
| MGR  | GR FIEDLER, JAMES     |                                     |                | 4360 Park Terrace<br><del>26025 MUREAU ROAD</del>  |                                       |                         | Drive  | Westlake Village, CA<br>CALABASAS CA 91361 |                      |  |  |
| MGR  | MGR LATHAM, DANIEL 20 |                                     |                |  | 26025 MUREAU ROAD                     |                         |  | CALABA                                     | SAS C                | A  |  |
|  |                       |                                     |                | 4360   | Park                                  | Terrace                 | Drive  | Westla                                     | ke Vi                | llage, CA<br>91361                       |  |
| 1  | ·                     |                                     |                |  |                                       |                         | 10   | 0002<br>-03/10<br>****1                    | 452<br>/980<br>88.7s | 7 <b>61</b> 5<br>1087002<br>. ****188.75 |  |
|  |                       |                                     | al-1-400-      |  | 46                                    |                         |  |  |                      |  |  |

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.

Cathylpaniel W. Latham 2/210/98 818/735-7600