## FILE NOW: Fee after May 1, will be \$588.75

FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State FILED 1997 DIVISION OF CORPORATIONS 97 APR 21 PM 2: 24 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee FILING FEE Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 SECRETARY OF STATE TALLAHASSEE, FLORIDA Name and Malling Address of Limited Liability Company **DOCUMENT** #M96000000287 1a. Principal Place of Business Address JAED GLOREN ASSOCIATES, LLC 805 THIRD AVENUE, 26TH FLOOR BO5 THIRD AVENUE, 26TH FLOOR NEW YORK NY 10022 NEW YORK NY 10022 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a. 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 08/01/1996 ΝY Sulte, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 3-3392564 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Žφ Country \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent 7. Name and Address of Current Registered Agent Name WRIGHT, LYNN W ESQUIRE 2716 REW CIRCLE, SUITE 102 Street Address (P.O. Box Number is Not Acceptable) OCOEE FL 34761 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. (Registered Agont Accepting Appointment) (NOTE Registered Agent signature required when reinstating) City, State and Zip Code Managing Members/Managers **Business Street Address** 10. Title MGRM GOREN BROTHERS, L.P. 805 THIRD AVENUE, 26TH FLO NEW YORK NY MGRM ETABLISSEMENT COMPAG. \$05 THIRD AVENUE, 26TH FLO NEW YORK NY 90002152399---04/23/97--01092--027 \*\*\*\*203.75 \*\*\*\*203.75

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), Fiorida 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.

JAED GLOREN ASSOCIATES, L.L.C.

SIGNATURE:

BY: GOREN BROTHERS, L.P.

2/3-759-1414 Daytime Phone \*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

INHSE10 R(12-96)