File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 99 APR 12 AM 9: 57 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # M97000000017** 1a. Principal Place of Business Address BABBAGE'S ETC. LLC 2250 WILLIAM D. TATE AVENUE 1013 CENTRE-ROAD GRAPEVINE TX 76051 WILMINGTON DE 19805 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation aue <u> ವಿವರಂ WILLIAM D</u> Suite, Apt. #, etc. 01/17/1997 DE Suite, Apt. #, etc. 4. FET Number Applied For City & State City & State 13-3917707 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country S8 75 Additional Fee Required 05/04/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CORPORATION SERVICE , 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Age): Accepting April (time in 1. (NOTE Hegistered Agent signature region it when reconsisting 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM RIGGIO, LEONARD 122 FIFTH AVENUE, FOURTH F NEW YORK NY MGR CARLSON, DAVID 2250 WILLIAM D. TATE AVENU GRAPEVINEN TX MGR FONTAINE, RICHARD 2250 WILLIAM D. TATE AVENU GRAPEVINE TX 1**02847901---**04/22/93--01094--003 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), 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 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 Signature and typetick from the control of weather manager of Manager Manager Manager Control of the Control of Manager Manager Control of the Control of th

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