2 nd and File on or before Sept. 30, 1998 or Limited Liability Company will be FINAL NOTICE: dissolved, if dissolved, minimum amount due to reinstate: \$688.75						FILED 1		
ANNUAL REPORT			ORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS 98 AUG 21 AM 10: 21			
1990					30 /	AUG Z I	amilu: 21	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE								
1. Name a of Limit	and Mailing Address ed Liability Company	# м97000000397						
PARADIGM PARTNERS INTERNATION 9744 WILSHIRE BLVD., #307 BEVERLY HILLS CA 90212				TIONAL, LLC		1e. Principal Place of Business Address 9744 WILSHIRE BLVD., #307 BEVERLY HILLS CA 90212		
2 Principal Place of Business 2a. Malli			ng Address		3. Date Organize	ed or Qualified	3a. State of Formation	
Suite, Apt. #, etc. Suite, Ap			1 # etc.		07/07/1997 DE			
Guile, Apri. 4, 510.			·		4. FEI Number Applied For			
City & State City & Sta			ite		95-46186	88	Not Applicable	
Zip Country Zip		Zip	Country		Date of Last Report 6. Certificate of Status Desired S8.75 Additional Fee Required			
7. Name and Address of Current Registered			Agent 8. Name and Addre		n of Now Book			
Name					Name and Address	s of New Pegis	stered Agentronice	
BLAZZARD, NORSE 4401 WEST TRADEWINDS AVE., #207 Street Address (P.O.					P.O. Box Number I	s Not Accepte	ble)	
LAUDERDALE-BY-THE-SEA FL 33			303		,			
			Sulte, Apt. #, etc.					
				City FL Zip Coo			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								
10. Title			Business Street Address		91	City, State and Zip Code		
MGRM	BAITLER, SIMON C		9744 WILS	HIRE BLVI	D., #307	BEVERI	LY HILLS CA	
MGRM	BLAZZARD, NORSE	i	4401 N. T	R ĀĎEW IND:	S AVE., #	LAUDE	RDALE-BY-THE-SE	
MGRM	CARPENTER, DAVID	R	3400 RIVE	RSIDE DR	., 9TH FL	BURBAI	NK CA	
MGRM	JOHNSTON, JAMES R		836 FARMI	NGTON AV	., #223	WEST H	HARTFORD CT	
¹ }RM	STONE, ROBERT W	ŀ	65 ROCKWO	OD LANE		GREEN	WICH CT	
					60	09701	630676 5 1/9801085004 588.75 ****588.75	

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. 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 eath; that I am a managing member or manager of the limited hability 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.

SIGNATURE

SECHALLISE AND TYPE DISCHRANTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #