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 ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 27 AM 9: 30 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000000089** 1a. Principal Place of Business Address CASH COW F4 (PERRY), L.L.C. 1020 EAST LAFAYETTE STREET, SUITE 106 1020 EAST LAFAYETTE STREET, TALLAHASSEE FL 32301 TALLAHASSEE FL 32301 3. Date Organized or Qualified | 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 02/02/1998 LA Suite, Apt. #, etc. Suite, Apl. #, etc. 4. FEI Number Applied For City & State City & State 59-3487254 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office PEREZ, SANTOS 2000 OLD FORT DRIVE Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 Suite, 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. Thereby accept the appointment as registered agent, and accept the obligations. antos Herez DATE 4/27/99 SIGNATURE 10. Title Managing Members/Managers City, State and Zip Code MGR SWANK, JEFF 7906 MCCLURE DRIVE TALLAHASSEE FL 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. Hurther certify that the information indicated on this annual report is true and accurate and that my agosture 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 a fixegule this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an 11 I do hereby certify that the information supplied with this filing do attachment with an address. H Swank 4/27/99 942-006 SIGNATURE: SIGNATURE AND TYPEU OF PRINTED HAME OF SIGNAY, MALIACHIE I MEMBER OF MALIACA

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