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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** FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 99 MAY 27 PH 1: 24 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE ALLAHASSEE, ELORIDA **DOCUMENT # M98000000317** 1a. Principal Place of Business Address CIRCUIT BOARD EXPRESS REALTY LLC 2 AVCO ROAD 2 AVCO ROAD HAVERHILL MA 01835 HAVERHILL MA 01835 3. Date Organized or Qualified | 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 04/03/1998 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BARLOW, T.M.
GLEASON BARLOW & BOHNE, P.A. Street Address (P.O. Box Number is Not Acceptable) 121-123 FIFTH AVENUE INDIALANTIC FL 32903 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. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when remistating) **Business Street Address** 10 Title Managing Members/Managers City. State and Zio Code MGRM GOSSELIN, MATHEW J 2 AVCO ROAD HAVERHILL MA CHARLES ST AUBIJ MGRM 2 AVCO ROAD HAVERHILL MA MGRM BOYCE, MARK 2 AVCO ROAD HAVERHILL MA **40**0002899784---5 -06/03/39--01077--008 ****588.75 ****588.75 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. 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 attachnient with an address. SIGNATURE AND TYPED OF PHILITED NAME OF SEENING MANAGING MEMBER OF MANAGER