FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name P95000007220 (3) PORTALEGRE, INC. Principal Place of Business Mailing Address 2000 G.W. THIRD AVE. SUITE 680~ SUITE 600" DO NOT WRITE IN THIS SPACE MIAMI-FL-33129 MIAMI FL 80120 3. Date Incorporated or Qualified 01/27/1995 2. Principal Place of Businoss 21 1000 BRICKEL AVE 2a. Mailing Address 4. FEI Number Applied For 1000 BRICKELL AVE. 65-0554323 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired SUITE Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 凡 MIAMI MI AMI Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible USA Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION COMPANY OF MIAMI PERRONE -201-9: DISOAYNE BLVD. P.O. Box Number is Not Acceptable) 4000 MIAMI CENTER-MIAMI FL-33131 11. Pursuant to the provision of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent agent. I am familiar with tate of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered bygations of, Section 607.0505, Florida Statutes. PERRONG STEPHEN L Signature, typed OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE 1.1 Title VAUGHN, JOSEPH 1.2 NAME 2000-S.W. THIRD AVE: SUITE 800-1000 BRICKEZL AVE. SUITE 900 STREET ADDRESS 1.3 STREET ADDRESS MIAMI-FL CITY-ST-ZIP 1.4 CITY - ST - ZIP MIAMI FL DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP T DELETÉ Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

64 City-St-ZiP

14. I 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 or supplicinental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trystee error wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of or an attachment with an ardress.

SIGNATURE:

JOSEPH VAVAHN PRES

4/20/98 305-379-7100