
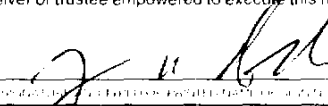


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 APR 14 AM 10:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L95000000958 TWIN LAKES RACQUET CLUB, L.C. SUITE 1100 ONE BISCAYNE PLAZA 100 S BISCAYNE BLVD MIAMI FL 33131		1a. Principal Place of Business Address SUITE 1100 ONE BISCAYNE PLAZ 100 S BISCAYNE BLVD MIAMI FL 33131			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 12/08/1995 3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		4. FEI Number 65-0626044		5. Date of Last Report 05/01/1998	
		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent HOLLO, TIBOR SUITE 1100 ONE BISCAYNE PLAZA 100 S BISCAYNE BLVD MIAMI FL 33131			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 3000002848119-1 City 04/22/99-01104-007 Zip Code ***188.75 ***188.75 FL		
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 _____			DATE _____		
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MEM	HOLLO, TIBOR	SUITE 1100 ONE BISCAYNE PL		MIAMI FL	
MEM	HOLLO, WAYNE	SUITE 1100 ONE BISCAYNE PL		MIAMI FL	
MEM	HOLLO, JEROME	SUITE 1100 ONE BISCAYNE PL		MIAMI FL	
4-19-99					
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 attachment with an address.					
SIGNATURE:  WAYNE HOLLO 3/23/99 305/358-7710					