File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.



FILED

ANNUAL REPORT 1998	Sandra Secre	ARTMENT OF STATE B. Mortham Stary of State F CORPORATIONS	DIVISION (I)	RY OF STATE CORPORATIONS • Pil 1:33
FILING FEE Annual Report \$100.00 \$ 188.75 Make Check Payable 1 1. Name and Malling Address of Limited Liability Company DOCU	O: FLORIDA DEPAR	Supplemental Fee		. ••
ARJ TECHNOLOGIES, 1801 SOUTH FEDERAL DELRAY BEACH FL 33	L.C. HIGHWAY, SU 483		DELRAY BEACH	EDERAL HIGHWAY, FL 33 4 83
2. Principal Place of Business 2a. Malling Address			3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.		08/08/1996 4. FEI Number	FL Ten
City & State Zip Country	City & State Zip Country		65-0685675 5. Date of Last Report	Applied For Not Applicable 6. Certificate of Status Desired
Zip Country	Zip	,	11 /05 /1007	\$8.75 Additional Fee Required
7. Name and Address of Current	Registered Agent	В.	11/05/1997 Name and Address of New Reg	istered Agent/Office
926 ALLAMANDA DRIVE DELRAY BEACH FL 33483 9. Pursuant to the provisions of Sections 608.416 at the registered office or registered agent, or both, in the as registered agent, and accept the obligations.	and 608.508, Florida Statute State of Florida. Such chang	Sulte, Apt. #, etc. City s, the above-named limited	Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code Lip Code And the above-named limited liability company submits this statement for the purpose of changing was authorized by affirmative vote of a majority of the members. I hereby accept the appointment	
SIGNATURE DATE [Registered Agent Accepting Appointment] (NOTE Registered Agent signature required when reinstating)				
		Business Street Address		ly, State and Z ip Code
MGRM-SLIM, MOUSSA MBR OSMAN, MOHAMAD MGRM IBTISSAM JALL MBR NIZAR JALLOU	1.801 S			Y BEACH FL V Beach FC. Y Beach FC
Si		**************************************	-09/1	26406763 6/9801036003 588.75 ****588.75

1 . 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. Hurther 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 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER