


**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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS			
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L98000001754</b>  H & J TEQUESTA ASSOCIATES, L.L.C. 150 EAST PALMETTO PARK ROAD, SUITE 400 BOCA RATON FL 33432		1a. Principal Place of Business Address 150 EAST PALMETTO PARK ROAD, BOCA RATON FL 33432			
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 <b>09/04/1998</b>  4. FEI Number <b>65-0860524</b>  5. Date of Last Report	
				3a. State of Formation <b>FL</b>  <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of Current Registered Agent  <b>AUERBACHER, STEVEN M ESQ</b> <b>150 EAST PALMETTO PARK ROAD, SUITE 4</b> <b>BOCA RATON FL 33432</b>			8. Name and Address of New Registered Agent/Office  Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code <b>FL</b>		
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 _____		
(If Registered Agent Accepting Appointment) (If Old Registered Agent/Agent in Charge) (If New Registered Agent)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	JACOBSON, HARVEY	4001 N. OCEAN BLVD., APT 7		BOCA RATON FL	
<del>MGR</del>	<del>JACOBSON, JESSICA</del> <i>DIVISION OF CORPORATION'S ERROR - DELETE</i>	<del>4001 N. OCEAN BLVD., APT 7</del>		<del>BOCA RATON FL</del>	
500002804795-4 -03/12/99--01103--018 ****188.75 ****188.75					
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: <u>Harvey Jacobson</u> <span style="float: right;">2/16/99</span>					
SIGNATURE MUST BE ACCOMPANIED BY NAME OF REGISTERING MEMBER OR MEMBER OF MANAGING					