

2nd and FINAL NOTICE: File on or before Sept. 29, 1999 or Limited Liability Company will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 99 SEP 13 PM 1:45

FILING FEE \$ 588.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1 Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002047 SILICON VALLEY ENGINEERING LIMITED COMPANY 245 SOUTHEAST 1 STREET, SUITE 228 MIAMI FL 33131

1a. Principal Place of Business Address 245 SOUTHEAST 1 STREET, SUIT MIAMI FL 33131

2 Principal Place of Business Suite, Apt. #, etc. City & State Co. Country Zip	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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3. Date Organized or Qualified 09/30/1998	3a. State of Formation FL
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent AMERILAWYER, 343 ALMERIA AVENUE CORAL GABLES FL 33134
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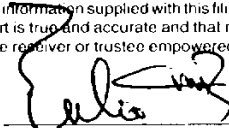
8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 200002989532--1 Suite, Apt. #, etc. -09/17/98--01037--010 ****588.75 ****588.75 City FL Zip Code

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. I hereby accept the appointment as registered agent and accept the obligations.

SIGNATURE _____	DATE _____
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10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	BERNABE, TULIO ENRIQUE	245 SOUTHEAST 1 STREET, SU	MIAMI FL

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 furnished 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 addendum thereto with an address.

SIGNATURE:  JULIO E. BERNABE Sep 9, 1999 305 652 7335