

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 MAR 22 AM 8:00
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 # M97000000428

DZS INVESTMENTS, LLC
10588 CHIPPEWA HEIGHTS NW
BRANDON MN 56315

1a. Principal Place of Business Address
10588 CHIPPEWA HEIGHTS NW
BRANDON MN 56315

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
07/21/1997

3a. State of Formation
MN

4. FEI Number
41-1870165
 Applied For
 Not Applicable

5. Date of Last Report
03/06/1998

6. Certificate of Status Desired
\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
**HAFNER, TROY B
STEWART, NALL, EVANS & HAFNER, P.A.
3355 OCEAN DRIVE
VERO BEACH FL 32963**

8. Name and Address of New Registered Agent/Office
Name
188.75
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
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 _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when appointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	SULLIVAN, TIMOTHY L	10588 CHIPPEWA HEIGHTS, NW	BRANDON MN
MGRM	ZACHER, GARY J	910 50TH AVENUE, SE	ALEXANDRIA MN

200002828172-1
-04/02/99 -01082--001
***188.75 ***188.75

Dec

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Timothy L. Sullivan* Timothy L. Sullivan 2-18-99 320/834-440