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 12 AM 9:30
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 # L97000001424

CONTINUITY LC
11231 SOUTHWEST 114 LANE CIRCLE
MIAMI FL 33176

1a. Principal Place of Business Address
11231 SOUTHWEST 114 LANE CIR
MIAMI FL 33176

2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

3. Date Organized or Qualified: 01/02/1998
3a. State of Formation: FL
4. FEI Number: 65-0801918
☐ Applied For
☐ Not Applicable
5. Date of Last Report
6. Certificate of Status Desired $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
AMERILAWYER, 343 ALMERIA AVENUE CORAL GABLES FL 33134	Name 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) (If FEI, Registered Agent Signature required when marked)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	CONCEPCION, DAVID R	11231 SOUTHWEST 114 LANE C	MIAMI FL
MGR	JOHNSON, ERIC T	11231 SOUTHWEST 114 LANE C	MIAMI FL

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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: Eric T. Johnson ERIC T. JOHNSON 3-30-99 (305) 254-9510
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (MEMBER OR MANAGER) DATE DAYTIME TELEPHONE #

INHSE10 R (12-98)