		May 1, 199 00.00 L <u>A</u> TE		d Liability	Com	pany will be	.				
LIMITE		LA COMban,		LORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			First Home (1)				
1998 DIVISION OF CORPORATIONS							98 MAR -2 PM 12: 57				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE							SECRETARY U. STATUA TALLAHASSEE, FLORIDA ,				
Name and Malling Address of Limited Liability Company DOCUMENT #					0000	00274	1				
THOMAS INVESTMENTS, L.C.							1a. Principal Place of Business Address				
9905 CLINT MOORE RD. BOCA RATON FL 33496							9905 CLINT MOORE RD. BOCA RATON FL 33496				
Principal Place of Business				iling Address			3. Date Organize	ed or Qualified	3a. State	of Formation	
Sulte, Apt.	#, etc.		Suite, A	pt. #, etc.			08/24/1993 FL				
City & State			City & Si	City & State			4. FE Number Applied For				
							65-0431 5. Date of Last F		6. Certific	Not Applica	
Žip		Country	Zip		Count	гу	01/31/1	007	\$8.75 Addi	ional Fee Required	
7. Name and Address of Current Registered				Agent		8. I	Name and Address	of New Regis	tered Agen	t/Office	_
HCRM CORP., 2200 CORPORATE BLVD. N.W.				Street Address (I			(P.O. Box Number is Not Acceptable)				
SUITE 401 BOCA RATON FL 33431					Sulte, Apt. #, etc			0.			
					City			Zip Code			
				S 51				<u>FL</u>			
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.											
SIGNATU	RE	(Registered Agont A	Accepting Appointment) (NOTE: Registered Ag	gent signatur	e required when reinstating		DATE			
10. Title	Title Managing Members/Managers			Business Street Address			City, State and Zip Code				
MGR	THOMAS, JOHN J JR.			9905 CLINT MOORE RE			RD.	BOCA F	ATON	FL	
MGR	THOMAS, STEPHEN M			9905 CLINT MOORE RD.			RD.	BOCA RATON FL			
	500002447205										
Ī							22/04	3/04/9801099003			
								****188.75 ****188.75			75
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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: SIGNATURE AND VYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Dat											

SIGNATURE AND YEED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Daytime Phone #

Date