
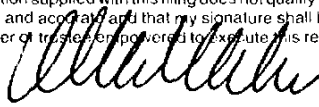


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAY 20 PM 3:32 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 # L93000000385 FTI UDMURT, L.C. 701 S.E. 24TH STREET C/O ELLER ASSOCIATES FT. LAUDERDALE FL 33316		1a. Principal Place of Business Address 701 S.E. 24TH STREET C/O ELLER ASSOCIATES FT. LAUDERDALE FL 33316			
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 11/01/1993 3a. State of Formation FL 4. FEI Number 65-0448972 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		5. Date of Last Report 04/27/1998		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent BERGER, JAMES L 100 NE 3RD AVE SUITE 400 FT LAUDERDALE FL 33301			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		
			FL		
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 _____		
<small>(Required Agent Accepting Appointment) (N/A) (Required Agent's signature required with each change)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MEM	SERFUSTINI, ANTHONY	500 NW 62ND ST 5TH FL		FT LAUDERDALE FL	
MEM	BELL, JAMES	500 NW 62ND ST 5TH FL		FT LAUDERDALE FL	
MEM	SRKAL, MILOTA	500 NW 62ND ST 5TH FL		FT LAUDERDALE FL	
AL APR 26 1999					
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:		 MILOTA K. SRKAL 4/24/99 (954) 564-8622			
<small>SIGNATURE AND TITLE OF REGISTERED AGENT OR NEWLY APPOINTED AGENT REQUIRED WITH EACH CHANGE</small>					