

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 98 MAY -1 PM 4: 09  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

<b>FILING FEE</b>	<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b>
<b>\$ 188.75</b>	<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>

1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L94000000287</b>  PREMIER OPTICS L.C. <del>2134 SEA PRINES WAY,</del> CORAL SPRINGS FL <del>33071-7737</del>
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1a. Principal Place of Business Address  <del>2134 SEA PRINES WAY</del> CORAL SPRINGS FL <del>33071</del>
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2. Principal Place of Business 3441 Greenview Tr W. Suite, Apt. #, etc.	2a. Mailing Address P.O. Box 771314 Suite, Apt. #, etc.	3. Date Organized or Qualified 06/24/1994	3a. State of Formation FL
City & State MARGATE FL	City & State CORAL SPRINGS FL	4. FEI Number 65-0500911	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 33063	Country USA	Zip 33077	Country USA
5. Date of Last Report 05/01/1997		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent  DINGES, ALAN 2134 SEA PRINES WAY CORAL SPRINGS FL 33071
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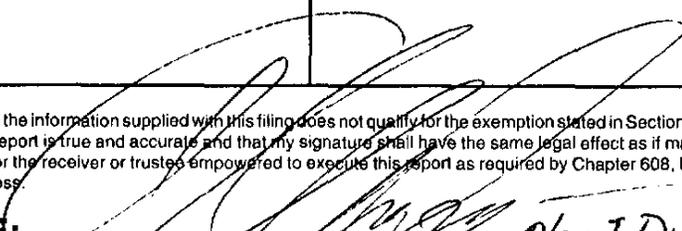
8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited 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 reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MAN	DINGES, ALAN	<del>2134 SEA PRINES WAY</del> 3441 Greenview TR W.	<del>CORAL SPRINGS FL</del> MARGATE, FL 400002514824--4 -05/07/98--01015--020 ****188.75 ****188.75 

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:  Alan J. Dinges CEO Date: 954-750-9717  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #