## FILE NOW: Fee after May 1, will be \$588.75

	ED LIABILITY COI ANNUAL REPOR 1997	T S	Sandra E Secreta DIVISION OF (	RTMENT OF STATE 3. Mortham by of State CORPORATIONS		(LED)	
FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF ST							
1. Name and Mailing Address of Limited Liability Company  DOCUMENT #L9400000315					TALLAHASSEE FLORIDA		
CYNTEX INVESTMENTS, L.C. 17760 FIELDBROOK CIRCLE BOCA RATON FL 33496					1a. Principal Place of Business Address 17760 FIELDBROOK CIRCLE BOCA RATON FL 33496		
If above	mailing address is incorrect to	n any way, line through incorre	ot Information and en	ter correction in Block 2a.	i		
2. Principal Place of Business 2a. h			alling Address		3. Date Organized or Qualific	d 3a. State of Formation	
Suite, Apt. #, etc. Suit			e, Apt. #, stc.		07/11/1994 4. FEI Number	řL .	
City & Sta	ata	City B C	City & State			Applied For	
City & Si	ale	City & S	City & State		55-0504681 5. Date of Last Report	Not Applicable	
Zip	Country	Zip		Country	05/01/1996	6. Certificate of Status Desired SB 7- Additional Fee Required	
	7. Name and Ado	iress of Current Registered	Agent	<del></del>	8. Name and Address of New	Registered Agent	
WOLLSTEIN, EDWARD				Name	Name		
17760	FIELDBROOK RATON FL 33	S CIR.		Street Address (P.O. Box Number is No		riable)	
				City	F	Zip Code	
its registe as registe	ered office or registered ag ered agent, and accept the URE	ent, or both, in the State of Fl	orida. Such change	was authorized by affirm	native vote of a majority of the mem	tatement for the purpose of changing bers. I hereby accept the appointment	
10. Title	tle Managing Members/Managers		Business Street Address		s (	City, State and Zip Code	
MGRM	WOLLSTEIN,	EDWARD	7760 FIELD		IR. BOCA R	ATON FL	
MGRM WOLLSTEIN, CYNTHIA 1			7760 FIELDBROOK CIR.		IR. BOCA R	ATON FL	
					70000 -05/ ***	21691376 07/9701044003 *203.75 ****203.75	
indicated limited lial attachme	on this annual report is tri bility company or the rece nt with an address.	ue and accurate and that my	signature shall have execute this report	e the same legal effect t t as required by Chapte	as if made under oath; that I am a l r 608, Florida Statutes; and that m	es. I further certify that the information managing member or manager of the yname appears in Block 10, or on an 56/ 540-/982	

INHSE10 R(12-96)