
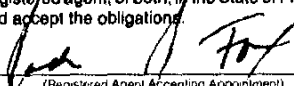
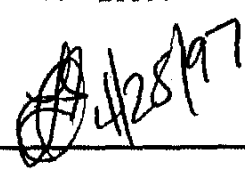
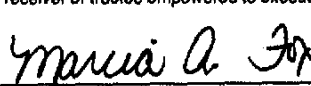


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company FOXCORP, L.C. 1512 E. ATLANTIC BLVD. POMPANO BEACH FL 33060		DOCUMENT # L94000000606 FILED 97 APR 25 PM 3:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1a. Principal Place of Business Address 1512 E. ATLANTIC BLVD. POMPANO BEACH FL 33060		1a. Principal Place of Business Address 1512 E. ATLANTIC BLVD. POMPANO BEACH FL 33060	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
2. Principal Place of Business Foxcorp L.C. Suite, Apt. #, etc. 5188 N.W. 47th Ave City & State Coconut Creek, Florida Zip 33073 Country USA		2a. Mailing Address Foxcorp L.C. Suite, Apt. #, etc. 5188 N.W. 47th Ave City & State Coconut Creek, Florida Zip 33073 Country USA	
3. Date Organized or Qualified 1/07/1994		3a. State of Formation FL	
4. FEI Number 65-0533118		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 03/15/1996		6. Certificate of Status Desired <input type="checkbox"/> Additional Fee Required	
7. Name and Address of Current Registered Agent WEINER, MICHAEL S 102 NORTH SWINTON AVENUE DELRAY BEACH FL 33444		8. Name and Address of New Registered Agent Name Fox, Jack I Street Address (P.O. Box Number is Not Acceptable) 5188 N.W. 47th Ave Suite, Apt. #, etc. Coconut Creek City FL Zip Code 33073	
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 4/14/97	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	FOX, JACK I	5188 N.W. 47th Ave 13360 KINGSBURY DRIVE	Coconut Creek FL 33073 WELLINGTON FL
MGRM	FOX, MARCIA A	5188 N.W. 47th Ave 13360 KINGSBURY DRIVE	Coconut Creek FL 33073 WELLINGTON FL
200002162532--0 -05/01/97--01108--017 ****203.75 ****203.75 			
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (l), 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: 		April 18, 1997 954-941-0369	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date Daytime Phone #	