LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS							FILED 99 APR 12 AH IO: 39		
ILING \$ 188.	FEE Annual Report \$	100.00 + \$88.75 ayable To: FLOR							
. Name :		OCUMENT				==	TALLAHAS	SEEL, FLORIOA	
	BAY POINT, L.O	•				1a. Principal F	lace of Business		
9	%LEN-JAC CORPO 6381 S.W. 87TI MIAMI FL 3314:	ORATION H TERRACE				6381 8	AC CORPO S.W. 87TI FL 3314	H TERRACE	
Princip	al Place of Business	2a. Maili	ng Address			3. Date Organ	ized or Qualified	38. State of Formation	
						03/22/	1995	FL	
uite, Apt.	, #. etc.	Suite, Ap	Suite, Apt. #. etc			4. FEI Numbe	r	Applied For	
ity & Sta	te	City & St	City & State			65~057	3272	Not Applicable	
gip	Country					5. Date of Last Report 6. Certificate of Status Desired			
.141	Country	1,1,1	Ì	Country		04/09/	1998	\$8.75 Additional Fee Required	
	7. Name and Address of	of Current Registered	Agent		Name	8. Name and Addre	ss of New Regis	stered Agent/Office	
				Ţ.	City			Zip Code	
ts register		both, in the State of Flo						ement for the purpose of changing is Thereby accept the appointment	
s register s registe	red office or registered agent, or red agent, and accept the oblig	both, in the State of Flo	rida Such change	e was aut	horized by aff	rmative vole of a majo	submits this state		
ts register is registe SIGNATU	red office or registered agent, or red agent, and accept the oblig	both, in the State of Flo lations.	rida Such change	e was aut	horized by aff	mative vote of a majo	submits this state irity of the member		
ts register is registe	red office or registered agent, or red agent, and accept the oblig IRE	both, in the State of Flo lations	rida Such change	e was auti 189 arana Business	horized by aff	mative vote of a majo	submits this state irity of the member	rs. Thereby accept the appointment	
ts register as registe SIGNATU 0. Title	red office or registered agent, or red agent, and accept the oblig IRE its places Agent Managing Members	both, in the State of Flo lations	rida Such change	e was auti 189 arana Business	Street Addra	ss **ERRACE	Submits this state rity of the member DATE City MIAMI ———————————————————————————————	rs. Thereby accept the appointment	
ts registers registers registers registers. SIGNATU O. Title MGR	red office or registered agent, or red agent, and accept the oblig the interval agent. Managing Members LEN-JAC CORPO	both, in the State of Flo lations Managers ORATION Supplied with this filling of	6381 S	Business . W	87TH	Section 1 19.07(3) (1)	DATE City MIAMI Florida Statutes	State and Zip Code FL 20/99-01076-015	