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 Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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

FILED

98 APR -6 AM 9: 03

SECRETARY OF STATE

of Limited Liability Company DOCUMENT # L950000036				00368	ALLAHASSEE, FLORIBA	
THERMAFIN MANUFACTURING, L.C. 1057 ELLIS ROAD N. UNIT 2 JACKSONVILLE FL 32254					1a. Principal Place of Business Address 1057 ELLIS ROAD N. UNIT 2 JACKSONVILLE FL 32254	
2. Principal Pla	ace of Business	28. Mailing Ad	ldress		3. Date Organized or Qualified	3a. State of Formation
Sulte, Apt. #, e		Suite, Apt. #, e	te		05/15/1995	FL
		Sune, Apt. *, e	ound, Apt. 4, oto.		4. FEI Number	Applied For
City & State	<u></u>	City & State	City & State		59-3316831	Not Applicable
Zip Country		Zip Count		trv	5. Date of Last Report	6. Certificate of Status Desired
c.h	Oscillary		000111	, ,	04/23/1997	\$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office		
KIRSCHNER MAIN PETRI, E GRAHAM TANNE ONE INDEPENDENT DRIVE SUITE 2000 JACKSONVILLE FL 32202				Name Street Address (P.O. Box Number is Not Acceptable) SIDDDD2487319		
				City	FL	-
its registered of		n, in the State of Florida. S				atement for the purpose of changing ers. I hereby accept the appointment
SIGNATURE				To required when reinstating)		
		· I · · ·	- ·	0, , , , ,		

10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code NEWMAN, MICHAEL D MGRM 1057 ELLIS ROAD JACKSONVILLE FL MGR BYROM, JOHN W P.O. BOX 1865 N/A GREEN COVE SPRINGS F MGR SMITH, JOHN R JR. P.O. BOX 53315 JACKSONVILLE FL MGR HOHLE, THOMAS HESSEGASSE 30 RH 11 1220 WIEN AUSTRIA MGR FEDRIZZI, THOMAS VTZ VERSIGHERRUNGS, TREUHA BAHNHOFPLATZ 9; 8023 APR - 8 19981

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 agnature 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:

MICHAEL D.

NOWMAN 4/2/98 904-695-2500