
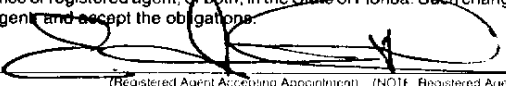
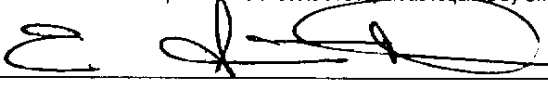


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b> 99 MAY -3 PM 2:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>FILING FEE</b> \$ 188.75		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT # L95000000418</b>		1a. Principal Place of Business Address	
BANYAN LICENSING, L.C. 800 EAST BROWARD BLVD. SUITE 17 FT. LAUDERDALE FL 33301				800 EAST BROWARD BLVD., STE. FT. LAUDERDALE FL 33301	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
1040 Bayview Drive Suite, Apt. #, etc. Suite 322 City & State Fort Lauderdale, FL Zip 33304 Country USA		1040 Bayview Drive Suite, Apt. #, etc. Suite 322 City & State Fort Lauderdale, FL Zip 33304 Country USA		06/02/1995	
				3a. State of Formation FL	
				4. FEI Number 59-9999999 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report 05/13/1998	
				6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent/Office		
BLINDERMAN, RICHARD I 3109 STIRLING ROAD SUITE 101 FT. LAUDERDALE FL 33312			Name Street Address (P.O. Box Number is Not Acceptable) 500002867985- - 5 Suite, Apt. #, etc. -05/07/93 --01122 --015 ****188.75 ****188.75 City FL Zip Code		
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's signature required when reinstating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	DAVIS, E. SCOTT	800 EAST BROWARD BLVD., ST		FT. LAUDERDALE FL	
MGRM	DAVIS, KATHY W	800 EAST BROWARD BLVD., ST		FT. LAUDERDALE FL	
		1040 Bayview Drive, Suite 322			
		1040 Bayview Drive, Suite 322			
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: 		E. SCOTT DAVIS 4/23/99 954 525-4003			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					