
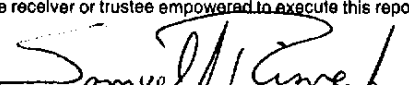


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILED 98 APR 27 PM 3:36 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
FILING FEE \$ 188.75		Annual Report \$100.00 + \$68.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DESIGNWORKS ADVERTISING OF FLORIDA, L.C. 2633 PLAZA PARKWAY WICHITA FALLS TX 76308		DOCUMENT # L95000000896	
2. Principal Place of Business 1515 University Dr. Suite, Apt. #, etc. Suite 103 City & State Coral Springs, FL Zip 33065		2a. Mailing Address 2633 Plaza Parkway Suite, Apt. #, etc. City & State Wichita Falls, TX Zip 76308	
3. Date Organized or Qualified 11/21/1995		3a. State of Formation FL	
4. FEI Number 65-0624429		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 04/08/1997		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 100002506861--9 City -04/30/98--01081--024 Zip Code ****188.75 ****188.75 FL	
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 signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	DRAPER, CRAIG A	2633 PLAZA PARKWAY	WICHITA FALLS TX
MGRM	BROWN, KIMBERLY K	3580 CORAL SPRINGS DRIVE	CORAL SPRINGS FL
MGRM	RISNER, SAMUEL J JR	4508 WESTWARD	WICHITA FALLS TX
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: 		Samuel J. Risner, Jr. 4/24/98 940-696-1229	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date Daytime Phone #	