


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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000000060	
DIRECT ENTERPRISES, L.C. 4888 WOOD POINTE WAY SARASOTA FL 34233		1a. Principal Place of Business Address  4888 WOOD POINTE WAY SARASOTA FL 34233	
2. Principal Place of Business		3. Date Organized or Qualified	
Suite, Apt. #, etc.		01/16/1996	
City & State		FL	
Zip		4. FEI Number	
Country		65-0641198	
Zip		5. Date of Last Report	
Country		02/12/1997	
7. Name and Address of Current Registered Agent		6. Certificate of Status Desired	
GOLDSMITH, STANLEY A 1605 MAIN ST, SUITE 1001 SARASOTA FL 34236		SB 75 Additional Fee Required <input type="checkbox"/>	
8. Name and Address of New Registered Agent/Office		3a. State of Formation	
Name Roblyn S. Hanna		FL	
Street Address (P.O. Box Number is Not Acceptable) 4888 Wood Pointe Way		<input type="checkbox"/> Applied For	
Suite, Apt. #, etc. Sarasota FL		<input type="checkbox"/> Not Applicable	
City FL		Zip Code 34233	
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 <i>Roblyn S. Hanna Manager</i>		DATE 3-2-98	
(Registered Agent Accepting Appointment)		(NOTE: Registered Agent signature required when reappointing)	
10. Title			
Managing Members/Managers			
Business Street Address			
City, State and Zip Code			
MGR	HANNA, MAGDI B	4888 WOOD POINTE WAY	SARASOTA FL
MGR	HANNA, ROBLYN S	4888 WOOD POINTE WAY	SARASOTA FL
MGR	BISHAY, HANY	4888 WOOD POINTE WAY	SARASOTA FL

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: *Roblyn S. Hanna Manager* (Roblyn S. Hanna) 3-2-98 941-927-5145

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #