


FILE NOW: Fee after May 1, will be \$588.75

APPROVED
AND
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97 MAY -1 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000000489	
MERJEX GROUP COMMUNICATIONS, L.C. 1040 BAYVIEW DRIVE STE 317 FORT LAUDERDALE FL 33304		1a. Principal Place of Business Address 403 - 1515 East Broward Blvd. Fort Lauderdale, Florida U.S.A. 33301	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
2. Principal Place of Business 1515 E. Broward Blvd Suite, Apt. #, etc. 403 City & State Ft. Lauderdale, FL Zip 33301		2a. Mailing Address 1515 E. Broward Blvd Suite, Apt. #, etc. 403 City & State Ft. Lauderdale FL Zip 33301	
3. Date Organized or Qualified 04/29/1996		3a. State of Formation FL	
4. FEI Number 65-0547670		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired S87a Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent TARKOE, CLINTON M 1040 BAYVIEW DRIVE STE 317 FORT LAUDERDALE FL 33304		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.506, 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 reinstalling)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	MERNER, GEORGE W	1040 BAYVIEW DRIVE STE 317	FORT LAUDERDALE FL
		400002173594--5 -05/09/97--01113--023 ****203.75 ****203.75 G. Alan 5/1/97	
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: George W. Merner		954-630-9111	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date Daytime Phone #	