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

FILING \$ 188. 1. Name a of Limit	Suite Ant # etc								1a. Principal Place of Business Address 500 EAST BROWARD BOULEVARD SUITE 1950 FT. LAUDERDALE FL 33394 3. Date Organized or Qualified 3a. State of Formation 09/27/1996 FL				
City & State				City & State				1 65 0606500				Applied For Not Applicable	
Zip		Country		Ζip		Countr	ry	5. Date of Last R	`			Status Desired	
500 EAST BROWARD BOULEVARD, SUITE 19 FORT LAUDERDALE FL 33394							Street Address (F	Address (P.O. Box Number is Not Acceptable) Apt. #, etc.					
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 changinits 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE [DATE]													
10. Title Managing Members/Managi			nbers/Managers	s Busines			ess Street Address		City,	, State and 2	Zip Co	ode	
MGR	KAMEL	HAIR,	STEVEN	R	400 h	1ORTH	WEST 74TF	!	PLANTA HEHEREN -04/3 ****	2856 30/39	313		
indicated o limited habi	on this annual re	eport is true r the receive	and accurate an	nd that my	signature shall	II have the s	emption stated in Se same legal effect as equired by Chapler 6	s if made under oath.	; that I am a mar	naging memi	nber or	r manager of the	

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