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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE

Name and Mailing Address of Limited Liability Company

FILING FEE

\$ 203.75

DOCUMENT #19600001033

775 NORTHLAKE BLVD. ACQUISITION, L.C.

APPROVED AND FILED

1997 MAR 1 1 PM 12: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BAL	8 SULPHUR SPR FIMORE FL 212 address is incorrect in any way, liv	27	tion and enter corr	rrection in Block 2a	1338 SULPHUR S BALTIMORE FL 2		
2. Principal Place of Business		2a. Mailing Addr	2a. Mailing Address		3. Date Organized or Qualified 3a. State of Formation 10/01/1996 FL		
Sulte, Apt. #, etc.			Suite, Apt. #, etc.		4. FEI Number	Applied For	
City & State		City & State	City & State		52 - 200 439 5. Date of Last Report		
Zip	Country	Zip	Count	ry	5. Date of Last Report	6. Certificate of Status Desired 88.75 Additional Fee Required	
7. Name and Address of Current Registered Agent				6. Name and Address of New Registered Agent			
SUITE 2	IH ORANGE AVE	NUE		Street Address 9/ Suite, Apt. #, etc.	bert J. Bel (P.O. Box Number is Not Accept 6 Lake Hous c. th Palm Bea	e Drive	

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.

North Palm Beach

BIONATURE	_

Zip Code

33408

1a. Principal Place of Business Address

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title **Business Street Address** City, State and Zip Code Managing Members/Managers MEM BELL, MICHAEL P 1338 SULPHUR SPRING ROAD BALTIMORE FL MEM BELL, ROBERT J 1.338 SULPHUR SPRING ROAD BALTIMORE FL 400002111984---03/12/97--01140--005 ****203.75

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