File on	or before May 1, 1998 or 1	.Imited Liabi	llty Com	pany will be	•				
subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State					FILED				
1998 DIVISION OF CORPORATIONS					93 MPR + 3 - 011 M1 03				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					SEA CONTRACTOR				
1. Name and Mailing Address of Limited Liability Company DOCUMENT # 196000001171									
FOXCRAFT TAMPA, LLC 5911 MARTIN LUTHER KING BLVD. TAMPA FL 33612					1a. Principal Place of Business Address 5911 MARTIN LUTHER KING BLVD TAMPA FL 33612				
									2. Principal Place of Business 2a. Mailing Address
59/1 Martin Luther King Blvd Sulte, Apt. Sulte, Apt.				····					
					4. FEI Number Applied For				
City & State City & Sta					59-3385932			Not Applicable	
Zip			Country		5. Date of Last Report 6. Certificate of		te of Status Desired		
336					06/03/1			onal Fee Required	
7. Name and Address of Current Registered Agent				Name 8. I	Name and Address	S OT NEW HEGIE	stered Agent/		
5911	FRED H MARTIN LUTHER KING A FL 33612	G BLVD.		5911 M	Setty J. Gurley reet Address (P.O. Box Number is Not Acceptable) 911 Martin Luther King Blvd.				
				Suite, Apt. #, etc.			<u> </u>		
			City				Zip Code		
Durantable the annihilate of Costinue 509 416 and 509 509. Eluc			Tampa		FL 33612				
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 () 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 () The state of 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 <u>3-23-98</u>			
10. Title	Managing Members/Managers	nbers/Managers Busi		ess Street Address		City, State and Zip Code			
MGRM	Betty J. Gurley	591	5911 MARTIN LUTHER KING BI TAMPA FL 33612-						
			501	50002480965-74 -04/07/9801046020 *****188.75 ****188.75					
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 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: Dilly & Surley 3-23-98 (101) 755-5666									

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