


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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN -7 AM 9:28

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE	

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L96000001191**

FLORIDA MARKETING & SALES GROUP, L.C.
C/O BAUR, MILLER & WEBNER
100 N BISCAYNE BLVD NEW WORLD TWR 21ST FL
MIAMI FL 33132-2306

1a. Principal Place of Business Address

C/O BAUR, MILLER & WEBNER
100 N BISCAYNE BLVD NEW WORL
MIAMI FL 33132

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		11/12/1996	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country		65-0728409	5. Date of Last Report
				04/17/1998	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent

WOODBRIDGE, FREDERICK JR
C/O BAUR, MILLER & WEBNER
100 N BISCAYNE BLVD NEW WORLD TWR 21
MIAMI FL 33132

8. Name and Address of New Registered Agent/Office

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
Suite, Apt. #, etc. _____
City _____ Zip Code **FL**

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 _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	AHRABIAN, DARIUS	100 N BISCAYNE BLVD 21ST F	MIAMI FL
MGRM	FLORIDA PROPERTY SAL,	100 N BISCAYNE BLVD 21ST F	MIAMI FL

05/04/99-90011-042
\$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: *Darius Ahrabian, MGRM* 4/9/99 305.377.3561
SIGNATURE, TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #