



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	
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 # L96000001288			
MAS TECHNOLOGY LIMITED COMPANY 4901 NW 17TH WAY SUITE 304 FT LAUDERDALE FL 33309		1a. Principal Place of Business Address 4901 NW 17TH WAY SUITE 304 FT LAUDERDALE FL 33309			
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.					
2. Principal Place of Business SAME		2a. Mailing Address SAME		3. Date Organized or Qualified 12/10/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation FL	
City & State		City & State		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		5. Date of Last Report	
				6. Certificate of Status Desired \$875 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent	
BAINES, MIKE 4901 N.W. 17TH AY SUITE 304 FT. LAUDERDALE FL 33309				Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 3000002173673--1 -05/09/97--01118--013 ***203.75 ***203.75 City FL Zip Code	
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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE _____					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	MAS TECHNOLOGY LTD. ,	24 BRIDGE STREET, LOWER HU		NEW ZEALAND	
MGRM	JORDAN, NEVILLE	24 BRIDGE STREET, LOWER HU		NEW ZEALAND	
* MGR	BAINES, MIKE	4901 NW 17TH WAY, SUITE 304		FT LAUDERDALE, FL 33309	
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:  (MIKE BAINES)		25 APRIL 1997		(954) 202-0686	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Daytime Phone #	