


2nd and File on or before Sept. 30, 1998 or Limited Liability Company will be
FINAL NOTICE: dissolved. If dissolved, minimum amount due to reinstate: \$688.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
FILING FEE \$ 588.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE		

FILED
98 SEP 30 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L96000001351

KUPERSMITH LIMITED COMPANY
% WAMPLER, BUCHANAN & BREEN
555 S. FEDERAL HIGHWAY
BOCA RATON FL 33432

1a. Principal Place of Business Address

% WAMPLER, BUCHANAN & BREEN
555 S. FEDERAL HIGHWAY
BOCA RATON FL 33432

2. Principal Place of Business 500 NE Spanish River Blvd Suite, Apt. #, etc. # 27 City & State Boca Raton FL Zip 33431		2a. Mailing Address 4606 7 th Street Suite, Apt. #, etc. Lubbock, Texas City & State Lubbock TX Zip 79416	
Country USA		Country USA	

3. Date Organized or Qualified 12/30/1996	3a. State of Formation FL
4. FEI Number 65-0716662	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 12/03/1997	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent
MAURER, JANI E
% WAMPLER, BUCHANAN & BREEN
555 S. FEDERAL HIGHWAY, SUITE 430
BOCA RATON FL 33432

8. Name and Address of New Registered Agent/Office
Name
Jani E Maurer
Street Address (P.O. Box Number is Not Acceptable)
500 NE Spanish River Blvd
Suite, Apt. #, etc.
27
City
Boca Raton FL
Zip Code
33431

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 Jane Maurer DATE 9/28/98
(If Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	KUPERSMITH, JOEL	4606 7TH STREET	LUBBOCK TX, 79416
MEM	KUPERSMITH, JUDITH	4606 7TH STREET	LUBBOCK TX, 79416

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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: Joel Kupersmith Judith Kupersmith 9/28/98 806-743-3000
(Signature and Title of Signing Managing Member or Manager) 9/28/98 806-743-2800
Date Daytime Phone #