


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAY -3 AM 10:55	
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 # L97000000053 REALINVEST PORTFOLIO, L.L.C. % A & P REGISTERED AGENT, INC. 2450 S.W. 137TH AVENUE, STE. 226 MIAMI FL 33175		1a. Principal Place of Business Address % A & P REGISTERED AGENT, IN 2450 S.W. 137TH AVENUE, STE. MIAMI FL 33175			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 01/13/1997 3a. State of Formation FL 4. FEI Number 65-0742544 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report 05/04/1998 6. Certificate of Status Desired SR 7.2 Additional Fee Requested <input type="checkbox"/>	
7. Name and Address of Current Registered Agent A & P REGISTERED AGENT, INC. 2450 S.W. 137TH AVE SUITE 226 MIAMI FL 33175			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 <div style="text-align: right;">FL</div>		
<p>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.</p>					
SIGNATURE _____			DATE _____		
(Principal Agent, Managing Agent, or both, (SR 7.2) Additional Fee Requested, (SR 7.2) Additional Fee Requested, (SR 7.2) Additional Fee Requested)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	STAR FININVEST, INC.	% Alayon & Associates, P.A.		MIAMI FL	
MEM	FORILAND INTERNATIONAL,	ALAYON & PENA PA 2450 SW 1		MIAMI FL	
		20301 W. COUNTRY CLUB DR.		MIAMI FL	
		3000002867883--4		-05/07/99--01121--001	
		****338.75		****188.75	
<div style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">\$188.75-ff</div>					
<p>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.</p>					
SIGNATURE: <i>X</i> <i>Arno P. Bosser</i> APR 21/99					