LIMITED LIABILITY COMPANY ANNUAL REPORT 1998	LORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAY - 1 PM 12: 17
FILING FEE S 188.75 Annual Report \$100.00 + \$88.75	# L97000000261 S, L.C.	1a. Principal Place of Business Address -10460 ROOSEVELT BLVD: STE-27ST PETERSBURG FL 33716
2967 Bay to Bay Bud. 2907 Sulto Apt. 4, Stc. 200 200 City & State Tampa, FL Zip Country Zip Country Zip	00	3. Date Organized or Organized or Organized or Organized or Organized or Organized or Organized
7. Name and Address of Current Registered AYALA, GLENN -2907 BAY TO BAY BLVD. STE 2 TAMPA FL 33629.	W. An	ame and Address of New Registered Agent/Office drew Krusen, Jr. O. Box Number is Not Acceptable) Day to Bay Blvd, Zip Code
Pursuant to the provisions of Sections 608.416 and 608.508 its registered office or registered agent, or both, in the State of Floras registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (fregistered Agent Accepting Appointment)	Florida Statutes, the above-named limited lida. Such change was authorized by affirmation	ability company submits this statement for the purpose of changing ve vote of a majority of the members. I hereby accept the appointment DATE 4-28-98
10. Title Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM AYALA, GLENN	2907 BAY TO BAY BL	VD. STE TAMPA FL
MGRM HINES, ANDREW H JR.	150 SECOND AVE. ST	E 1170 ST PETERSBURG FL
MGRM HINES, ANDREW H JR.	150 SECOND AVE. ST	E 1170 ST PETERSBURG FL
MGRM KRUSEN, W A JR.	2907 BAY TO BAY BL	VD. STE TAMPA FL
MGRM GRIFFIN, BILLY L	272 STONE HAVEN WA	Y SENECA SC
MGRM LYKES , JOSEPH T. III	1810 S. MACDILL AVE, ST	E. ONE TAMPA, FL
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11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGE

4-28-98

813-837-3009 Daytime Phone #