

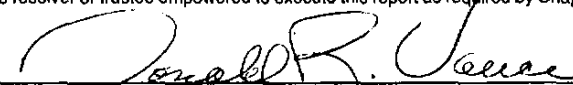


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L97000000352	
ZICORP CONSTRUCTORS, L.C. 1200 20 STREET NORTH ST PETERSBURG FL 33713-5700		1a. Principal Place of Business Address 1200 20 STREET NORTH ST PETERSBURG FL 33713	
2. Principal Place of Business 1363 22nd Street North Suite, Apt. #, etc. Suite A City & State St. Petersburg, Florida Zip 33713		2a. Mailing Address 1363 22nd Street North Suite, Apt. #, etc. Suite A City & State St. Petersburg, Florida Zip 33713	
Country Pinellas		Country Pinellas	
3. Date Organized or Qualified 03/20/1997		3a. State of Formation FL	
4. FEI Number 59-3382616		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent CAREY, MICHAEL R CAREY O'MALLEY WHITAKER & MANSON PA 100 S ASHLEY DRIVE TAMPA FL 33602		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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 _____		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
MGR	MORROW, DANIEL J	1363 22nd Street North, Ste A 1200 20 STREET NORTH	ST PETERSBURG FL
MGR	HOLLINGSWORTH, JAMES E	1363 22nd Street North, Ste A 1200 20 STREET NORTH	ST PETERSBURG FL
MGRM	VANCE, DONALD R	1363 22nd Street North, Ste A	St Petersburg FL
			200002503782--3 -04/28/98--01108--011 ****188.75 ****188.75 AL APR 27 1998
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: 		3/9/98 813-327-3877	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date Daytime Phone #	