


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		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAR 11 AM 10:27 LR 3/12	
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 # L97000000405				1a. Principal Place of Business Address	
EDEN ISLE DEVELOPMENT, L.C. 1130 W. PENDER ST., STE. 1400, VANCOUVER BRITISH COLUMBIA V6E, 4A4						1130 W. PENDER ST., STE. 140 BRITISH COLUMBIA V6E, 4A4	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified		3a. State of Formation	
1197 EDEN ISLE BLVD. N.E. Suite, Apt. #, etc. # 2 City & State ST. PETERSBURG FL Zip 33704 Country USA		1197 EDEN ISLE BLVD. N.E. Suite, Apt. #, etc. # 2 City & State ST. PETERSBURG FL Zip 33704 Country		04/10/1997		FL	
				4. FEI Number 58-2304551		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report NEW		6. Certificate of Status Desired <input type="checkbox"/> \$175 Additional Fee Required	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office			
THOMPSON, STEPHEN E 850 PARK SHORE DR., 3RD FL. NAPLES FL 34103				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	GALBRAITH, ROSS H	1130 W. PENDER ST., STE. 1		BRITISH COLUMBIA V6E			
MGR	TYNAN, BRENT	1130 W. PENDER ST., STE. 1 1197 EDEN ISLE BLVD. N.E. #2		BRITISH COLUMBIA V6E ST. PETERSBURG, FL 33704			
800002456988- - 3 -03/13/98--01092--006 ****188.75 ****188.75							

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:



BRENT TYNAN

3/7/98 813-827-1568

SIGNATURE AND TYPED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #