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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILING FEE	Annual Repo	rt \$100.00 (Pavable]	+ \$88.75 C	orporation	Supplemental	Fee
Name and Ma of Limited Liab			MENT	4	00000489	

1a. Principal Place of Business Address

FCI (TAMPA), L.C. 2701 N. ROCKY PT. DR., STE. 990 TAMPA FL 33607

2701 N. ROCKY PT. DR., STE. TAMPA FL 33607

FILED

98 APR -3 PM 1: 18

2. Principal Place of B	usiness	2a. Mailing Addr	ess	3. Date Örganized or 0	Qualified 3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc		05/06/199° 4. FEI Number	7 FIL Applied For
City & State		City & State		59-3447011	Not Applicable
			I Country	5. Date of Last Report	6. Certificate of Status Desired
Z ip	Country	Zip	Country		S8.75 Additional Fee Required
7. Nan	ne and Address of Cu	irrent Registered Agent		8. Name and Address of N	ew Registered Agent/Office
DALY, TERE	NCE J		Name	REID HANEY, ESQ.	
		omm 4104	Street	Address (P.O. Box Number is Not	Acceptable)
TAMPA FL 3		., STE. 4100		101 E. KENNEDY BL	VD., STE. 4100
			Suite,	Apt. #, etc.	
			City		Zip Code
				TAMPA	FL 33602
9. Pursuant to the pro-	visions of Sections 608	3.416 and 608.508, Florida	Statutes, the above-na	med limited liability company submits	s 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.

SIGNATU	RE THE THE THE THE THE THE THE THE THE TH	ETD HANEY, ESQ.	DATEMARCH 13, 1998
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM MEM	CAPITAL GLORIOUS, LTD. ZHANG, JING X	22 FL., CENTRAL TOWER, 2 2701 N. ROCKY PT. DR., S	·

900002482669-- F -04/08/98--01061--024 ****197.50 ****197.50

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
