


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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR 27 PM 1:52 <i>mtu</i> 4/28	
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 # L97000000633		1a. Principal Place of Business Address	
FIRST BOCA CAPITAL, L.C. 2295 CORPORATE BLVD., N.W. SUITE 140 BOCA RATON FL 33431				2295 CORPORATE BLVD., N.W. SUITE 140 BOCA RATON FL 33431	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
2295 Corporate Blvd Suite, Apt. #, etc. # 140 City & State Boca Raton, FL Zip 33431		2295 Corporate Blvd Suite, Apt. #, etc. # 140 City & State Boca Raton, FL Zip 33431		06/10/1997 4. FEI Number 65-0762716	
Country US		Country US		3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
WINDERMAN, HARRY ESQ. 2295 CORPORATE BLVD., N.W. SUITE 140 BOCA RATON FL 33431		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City			
		500002508595--7 -05/04/98--01006--002 ****188.75 ****188.75 FL			
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 <i>Harry Winderman</i> DATE 4-20-98 <small>(Registered Agent Accepting Appointment) (Not a Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	WEINBERG, ROBERT	2295 CORPORATE BLVD., N.W.		BOCA RATON FL	

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:

*Robert Weinberg*

Robert Weinberg  
Managing Member

4/20/98 561-994-3830

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

Date

Daytime Phone #