


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
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 # L97000000675 EFG DEVELOPMENT, L.L.C. 17031 BROOKWOOD DRIVE BOCA RATON FL 33496		1a. Principal Place of Business Address 17031 BROOKWOOD DRIVE BOCA RATON FL 33496	
2. Principal Place of Business SAME	2a. Mailing Address SAME	3. Date Organized or Qualified 06/20/1997	3a. State of Formation FL
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 52-2091671	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	5. Date of Last Report 04/10/1998	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip	Country	Zip	Country
7. Name and Address of Current Registered Agent GREENBERG, FRED 17031 BROOKWOOD DRIVE BOCA RATON FL 31496		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 000002868570-- 9 Suite, Apt. #, etc. -05/07/99--01135--025 ****188.75 ****188.75 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 _____	
10. Title Managing Members/Managers Business Street Address City, State and Zip Code			
MGRM	GREENBERG, FRED	17031 BROOKWOOD DRIVE	BOCA RATON FL
MGRM	GREENBERG, EVELYN	17031 BROOKWOOD DRIVE	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: 