
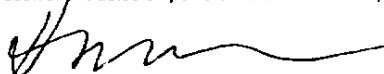


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		SEC DIVISION FILED MAY 10 1999 MAY 10 AM 10:10 5/12	
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 LIFE ENHANCEMENT CONSULTANTS, L.C. 7350 SOUTH TAMiami TRAIL, SUITE 210 SARASOTA FL 34231		DOCUMENT # L97000000785 1a. Principal Place of Business Address 7350 SOUTH TAMiami TRAIL, SU SARASOTA FL 34231			
2. Principal Place of Suite, Apt. #, etc. City & State Zip		Helen Mandelbaum 6815 Willow Wood Dr. #4053 Boca Raton, FL 33434 City & State Country		3. Date Organized or Qualified 07/22/1997 3a. State of Formation FL FEL Number # 65-0757-201 APPLIED FOR 4. Date of Last Report 04/20/1998 5. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent MILLER, HAROLD O 7350 SOUTH TAMiami TRAIL, SUITE 210 SARASOTA FL 34231		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code 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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointment)		DATE _____			
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	MANDELBAUM, HELEN	7350 SOUTH TAMiami TRAIL,		SARASOTA FL	
MGRM	LIFE ENHANCEMENT TRU,	7350 SOUTH TAMiami TRAIL,		SARASOTA 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: 		11/22/99 (561) 852-8180			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER OR MEMBER OF MANAGER					