

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
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JUL 22 PM 4:10

FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT # <u>C97000000816</u>
Indigo Resorts International, LC 3029 Alhambra Street Ft. Lauderdale, FL 33304	

1a. Principal Place of Business Address
4053 S. Surf Road Hollywood Beach, FL 33019

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
4053 S. Surf Road	3029 Alhambra Street	7/97	Florida
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State	4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Hollywood Bch, FL	Ft. Lauderdale, FL	65-0773513	
Zip	Country	5. Date of Last Report	6. Certificate of Status Desired
33019	USA		\$8.75 Additional Fee Required <input type="checkbox"/>
	33304		
	USA		

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
Harold S. Bofshever, Attny International Building Suite 917 2455 E. Sunrise Blvd. Ft. Lauderdale, FL 33304	Name Virginia A. Daniels Street Address (P.O. Box Number is Not Acceptable) 3029 Alhambra Street Suite, Apt. #, etc. City Ft. Lauderdale FL Zip Code 33304

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 Virginia A. Daniels DATE 7/17/98
(Registered Agent Accepting Appointment) (NOT: Registered Agent signature required when contesting)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	Mary Ann Bongiorno	3029 Alhambra Street	Ft. Lauderdale, FL 33304
MEM	Jacqueline A. Slack	1710 Northeast 8th St	Ft. Lauderdale, FL 33304

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: Mary A. Bongiorno, Director 7/18/98
SIGNATURE AND TYPE OF POSITION OF SIGNING MANAGER, MEMBER OR MANAGER Date Daytime Phone #