

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	FILED 99 MAR 22 AM 8:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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 # L97000001007 VELAND L.C. 2106 BISPHAM ROAD, SUITE B SARASOTA FL 34231		1a. Principal Place of Business Address 2106 BISPHAM ROAD, SUITE B SARASOTA FL 34231	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
		3. Date Organized or Qualified 09/11/1997	3a. State of Formation FL
		4. FEI Number 65-0807495	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report 04/13/1998	6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent PATTERSON, JOHN 46 NORTH WASHINGTON BOULEVARD, SUITE SARASOTA FL 34231		8. Name and Address of New Registered Agent/Office Name 188.75 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 000002828210- City 04702635001082-020 FL 188.75 ****188.75	
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 _____	
<small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when re-appointing)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	1071606 ONTARIO INC.,	253 ROBINA ROAD	ANCASTER, ONTARIO, C
MGRM	BALSALM L. CORPORATI,	95 ST. CLAIR AVENUE W., #1	TORONTO, ONTARIO, CA
MGRM	RAWEC HOLDINGS LIMIT,	5500 DIXIE ROAD, BOX E	MISSISSAUGA, ONT., C
MGRM	SANVIN, INC.	46 NO. WASHINGTON BLVD., #	SARASOTA FL
MGRM	SACKVILLE HOLDINGS, IN	ONE FIRST CANADIAN PLACE,	TORONTO, ONTARIO, CA
MGRM	K.G.C. LTD.,	8 KING STREET E., #1400	TORONTO, ONT., CANAD
<i>dc</i>			
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: <i>R Bennett</i>		<i>3/17/99</i> <i>941-9248786</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>	<small>Origin Phone #</small>