


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	
FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAY 26 AM 11:07					
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 # L97000001058			
NEW YORK BAY IMPORTS, L.C. 1401 VILLAGE BLVD., STE. #132 WEST PALM BEACH FL 33409		1a. Principal Place of Business Address 1401 VILLAGE BLVD., STE. #132 WEST PALM BEACH FL 33409			
2. Principal Place of Business SAME AS #1		2a. Mailing Address		3. Date Organized or Qualified 09/19/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation FL	
City & State		City & State		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Zip		5. Date of Last Report	
Country		Country		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent MANCINI, CHRISTINE 1401 VILLAGE BLVD., STE. 132 WEST PALM BEACH FL 33409				8. Name and Address of New Registered Agent/Office Name Same Street Address (P.O. Box Number is Not Acceptable) 900002545969--5 Suite, Apt. #, etc. -06/03/98--01053--014 ****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 <u>Christine Mancini</u> DATE <u>4/28/98</u> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title		Managing Members/Managers		Business Street Address	
MGRM		MANCINI, CHRISTINE		1401 VILLAGE BLVD. #132	
MGRM		GIUSEPPE, GRISIO		1401 VILLAGE BLVD. #132	
				City, State and Zip Code WEST PALM BCH. FL WEST PALM BEACH 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: Christine Mancini CHRISTINE MANCINI 4/28/98

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

Date

Daytime Phone #