


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 <b>Katherine Harris</b> 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 <b>SEA OAKS INVESTMENT GP, L.C.</b> 2665 SOUTH BAYSHORE DRIVE, SUITE 302 COCONUT GROVE FL 33133 <i>GA-AR CM</i>		DOCUMENT # <b>19700001254</b>	
2. Principal Place of Business <b>1235 Winding Oaks Circle</b> Suite, Apt. #, etc. City & State <b>Vero Beach, FL</b> Zip <b>32963</b> Country <b>USA</b>		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified <b>11/10/1997</b>		3a. State of Formation <b>FL</b>	
4. FEI Number <b>APPLIED FOR</b> <b>65-0826328</b>		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report <b>03/13/1998</b>		6. Certificate of Status Desired <b>\$8.75 Additional Fee Required</b> <input type="checkbox"/>	
7. Name and Address of Current Registered Agent <b>MEUNIER, JEAN-MARC</b> C/O CONSTRUCTA, INC. 2665 SOUTH BAYSHORE DRIVE, SUITE 302 COCONUT GROVE FL 33133		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) <b>3000002827173-</b> Suite, Apt. #, etc. <b>-04/01/99--01108--001</b> <b>***188.75 ***188.75</b> City <b>FL</b> 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 _____	
(By authorized Agent/Adopting Agent/Manager) (NOTE: By authorized Agent, signature is placed within this box)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	PEITRI, MARC	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	MEUNIER, JEAN-MARC	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	GEIBEL, GEORGE	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	<del>FAZILLEAU, ERIC</del>	<del>2665 SOUTH BAYSHORE DRIVE,</del>	<del>COCONUT GROVE FL</del>
MGR	DININ, ALAIN	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	LAURENT, JEAN-MARIE	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	Denize, HERVE	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE FL
MGR	BRION, JACQUES	2665 SOUTH BAYSHORE DRIVE,	COCONUT GROVE 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: 