


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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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 # L97000001404
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SEALINK INVESTMENTS, L.C.
~~G/O SALES PAVILION~~
~~790 ANDREWS AVENUE~~
~~DELRAY BEACH FL 33483~~

1a. Principal Place of Business Address
C/O SALES PAVILION 790 ANDREWS AVENUE DELRAY BEACH FL 33483

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	SEALINK INVESTMENTS, L.C. C/O BLAKELEY INVESTMENT CO.
City & State	Suite, Apt. #, etc. 60 STATE STREET SUITE 3400
Zip	City & State BOSTON, MA
Country	Zip 02109
	Country USA

3. Date Organized or Qualified	3a. State of Formation
12/16/1997	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
65-0808485	
5. Date of Last Report	6. Certificate of Status Desired
N/A	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
REYNOLDS, JAY P ESQ. 555 SOUTH FEDERAL HIGHWAY, SUITE 450 BOCA RATON FL 33432	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE _____

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR.	GERALD W. BLAKELEY III	790 NORTH ANDREWS AVE, C-2	DELRAY BEACH FL

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****188.75 ****188.75

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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: GERALD W. BLAKELEY III (617) 227-3900