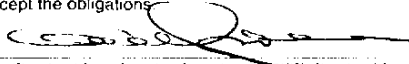


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED APR 23 PM 5:00 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 A. RYMA, L.L.C. P.O. BOX 1472 LONGWOOD FL 32752-1472		DOCUMENT # L98000000015		1a. Principal Place of Business Address P.O. BOX 1472 LONGWOOD FL 32752	
2. Principal Place of Business 114 CLOVER LN. Suite, Apt. #, etc. City & State LONGWOOD, FL. Zip 32750		2a. Mailing Address P.O. Box 1472 Suite, Apt. #, etc. City & State LONGWOOD, FL Zip 32752-1472		3. Date Organized or Qualified 01/05/1998 4. FEI Number 593488791 5. Date of Last Report 6. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent CORPORATE CREATIONS, ENTERPRISES IN 4521 PGA BOULEVARD, #211 PALM BEACH GARDENS FL 33418		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 600002858826-- Suite, Apt. #, etc. -04730/99--01104--023 ****197.50 ****197.50 City FL			
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)		DATE 2-18-99			
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MBR	RYAN, SUSAN	P.O. BOX 1472 N/A		LONGWOOD FL	
MBR	CHARLES GOWEN	P.O. Box 1472 360 E. Hwy. 434, W		WINTER SPRINGS, FL 32708	
MBR	CHARLES A MASON	P.O. Box 1472 / OR: 150 S FRANKLIN AVE,		LONGWOOD, FL 32752 1472 BERLIN, NJ 08009	
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: 		CHARLES GOWEN		407-2214075 1-18-99, 407-2348066	