
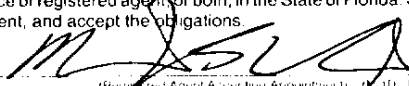
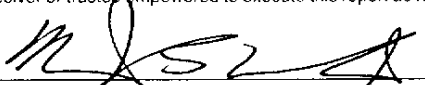


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
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 WESTFALIA REAL ESTATE SERVICES, LC 13925 58TH STREET NORTH CLEARWATER FL 34620		DOCUMENT # L98000000386			
2 Principal Place of Business Suite, Apt #, etc. City & State Zip		2a. Mailing Address Suite, Apt #, etc. City & State Zip		3. Date Organized or Qualified 03/30/1998 3a. State of Formation FL 4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required <input checked="" type="checkbox"/>	
7. Name and Address of Current Registered Agent HUMPHRIES, J. BOB 501 EAST KENNEDY BLVD., SUITE 1700 TAMPA FL 33602		8. Name and Address of New Registered Agent/Office Name Marvin J. Slovacek Street Address (P.O. Box Number is Not Acceptable) 13925 58th St. N. Suite, Apt #, etc. City Clearwater FL Zip Code 33760			
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 4/29/99					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	SLOVACEK, MARVIN J JR.	13925 58TH STREET NORTH		CLEARWATER FL	
MGR	RADTKE, H H	13925 58TH STREET NORTH		CLEARWATER 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:  Marvin J. Slovacek 4/29/99 (727) 535-7999					

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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