File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY OF TAKE OF STATE OF STATE Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 991KR - 3 AM 9: 04 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE DOCUMENT # 198000000582 1a. Principal Place of Business Address EVAN E. GARBER, CPA, L.C. 14508 CLIFTY COURT 14508 CLIFTY COURT **TAMPA FL 33624 TAMPA FL 33624** 2 Principal Place of Business 2a, Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 05/07/1998 FLSuite, Apt. #, etc. Suite, Apt #, etc. 4. FEI Number Applied For City & State City & State 59-3504154 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Ζip Country Country \$8.75 Additional Fee Required NIA 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office GARBER, EVAN E 14508 CLIFTY COURT Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33624** Suite, Apt #, etc 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. Thereby accept the appointment as registered agent, and accept the obligations. DATE SIGNATURE (Registered Agent Accepting Appeartment). (NOTE: Registered Agent signature in joined which never to great 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code GARBER, EVAN E MGRM 14508 CLIFTY COURT TAMPA FL MGRM BIRCH, GERALD L 330 N. SPRING BLVD. TARPON SPRINGS FL 100002796791----03/08/99--01118--016 \*\*\*\*188.75 \*\*\*\*188.75 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. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal cliect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or to see epipowered 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: