

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

LIMITED LIABILITY COMPANY		FLORIDA DEPARTMENT OF STATE	
ANNUAL REPORT		Katherine Harris	
1999		Secretary of State	
		DIVISION OF CORPORATIONS	
<b>FILING FEE</b> \$ 188.75		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b>	
		<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT #</b> L98000000637	
SINGLE SEARCH GLOBAL, A LIMITED COMPANY 13014 NORTH DALE MABRY, SUITE 151 TAMPA FL 33618		1a. Principal Place of Business Address 13014 NORTH DALE MABRY, SUIT TAMPA FL 33618	
2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
3. Date Organized or Qualified		3a. State of Formation	
05/19/1998		FL	
4. FEI Number		<input type="checkbox"/> Applied For	
593509906		<input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired	
		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
BENTSEN, LISA D 13014 NORTH DALE MABRY, SUITE 151 TAMPA FL 33618		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 _____		DATE _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when new filing)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BENTSEN, LISA D	13014 NORTH DALE MABRY, SU	TAMPA FL
MGRM	BENTSEN, ROBERT	13014 NORTH DALE MABRY, SU	TAMPA FL
500002868175--2 -05/07/99--01134--013 ****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. 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: <u>Robert Bentsen</u>		ROBERT BENTSEN 2/25/1999 813-264-1705	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date: Daytime Phone #	