
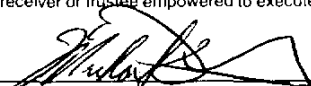


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
99 MAY 10 AM 11:59

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 DOCUMENT # L98000001006 SANDPIPER PCI, L.C. 832 SOUTH MILITARY TRAIL DEERFIELD BEACH FL 33442		1a. Principal Place of Business Address 832 SOUTH MILITARY TRAIL DEERFIELD BEACH FL 33442	
2. Principal Place of Business 832 S. Military Trail Suite, Apt. #, etc.		2a. Mailing Address 832 S. Military Trail Suite, Apt. #, etc.	
City & State Deerfield Beach FL		City & State Deerfield Beach FL	
Zip 33442		Country USA	
3. Date Organized or Qualified 07/09/1998		3a. State of Formation FL	
4. FEI Number 65-0851920		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report N/A		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent HANDLER, HENRY B ESQ. 2255 GLADES ROAD, SUITE 218A BOCA RATON FL 33431		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code	
SIGNATURE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature is required when it is obtained)</small>		DATE _____	
10. Title MGRM MGRM	Managing Members/Managers GOLDBERG, MICHAEL PORTEN, SCOTT	Business Street Address 832 SOUTH MILITARY TRAIL 832 SOUTH MILITARY TRAIL	City, State and Zip Code DEERFIELD BEACH FL DEERFIELD BEACH 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: 		Michael D. Goldberg 4/27/99 954-422-1883	

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****70.00 ****70.00