


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

FEB 19 1999

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

<b>FILING FEE \$ 188.75</b>	<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 # L98000001092</b>  <b>PEAK MEDIA INVESTMENT, L.C.</b> <b>101 EAST KENNEDY BOULEVARD, SUITE 3300</b> <b>TAMPA FL 33602</b>
--

1a. Principal Place of Business Address  <b>101 EAST KENNEDY BOULEVARD,</b> <b>TAMPA FL 33602</b>
--

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 <b>07/16/1998</b>	3a. State of Formation <b>FL</b>
		4. FEI Number <b>59-3202-079</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report	6. Certificate of Status Desired <b>\$8.75 Additional Fee Required</b> <input type="checkbox"/>

7. Name and Address of Current Registered Agent  <b>CEA INVESTORS, INC.</b> <b>101 EAST KENNEDY BOULEVARD, SUITE 33</b> <b>TAMPA FL 33602</b>	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City <b>FL</b> 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 \_\_\_\_\_  
(If Registered Agent, check box; if Agent for Service, check box; if both, check both boxes.)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BRB PARTNERSHIP,	1200 NEW HAMPSHIRE AVE., N	WASHINGTON DC
MGRM	WEST, BOB	1450 SCALP AVENUE	JOHNSTOWN PA
MGRM	EWEN, HAROLD	101 EAST KENNEDY BOULEVARD	TAMPA FL
MGRM	QUITONI, FRANK	1450 SCALP AVENUE	JOHNSTOWN PA
MGRM	LISECKY, BILL	92 SOUTH LAKE DRIVE	STAMFORD CT
MGRM	LOREBE INVESTMENTS, LT	3301 BAYSHORE BLVD., #1803	TAMPA FL
Additional sheet attached.		4000002870864--8 -05/11/99--01034--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: *George P. Harris* *KP of M. Harris* *April 23/1999* *813226-8544*