



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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED APR 26 PM 5:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA									
<b>FILING FEE</b> Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee <b>\$ 188.75</b> Make Check Payable To: FLORIDA DEPARTMENT OF STATE		<b>DOCUMENT #</b> L98000001273											
<b>1. Name and Mailing Address of Limited Liability Company</b> UNIVERSITY TRADING, L.C. 4691 N. UNIVERSITY DRIVE, SUITE 424 CORAL SPRINGS FL 33067		<b>1a. Principal Place of Business Address</b> 4691 N. UNIVERSITY DRIVE, SU CORAL SPRINGS FL 33067											
<b>2. Principal Place of Business</b> 4630 N. University DR Suite, Apt. #, etc. Ste 424 City & State Coral Springs FL Zip 33067		<b>2a. Mailing Address</b> 4630 N. University DR Suite, Apt. #, etc. Ste 424 City & State Coral Springs FL Zip 33067 Country USA		<b>3. Date Organized or Qualified</b> 07/30/1998 <b>3a. State of Formation</b> FL <b>4. FEI Number</b> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable									
<b>7. Name and Address of Current Registered Agent</b> PALUMBO, WENDY 4691 N. UNIVERSITY DRIVE, SUITE 424 CORAL SPRINGS FL 33067		<b>8. Name and Address of New Registered Agent/Office</b> Name Palumbo Wendy Street Address (P.O. Box Number is Not Acceptable) 4630 N. University Dr. Suite, Apt. #, etc. Suite 424 City Coral Springs FL Zip Code 33067											
<b>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.</b> SIGNATURE <u>Wendy Palumbo</u> DATE <u>4/23/99</u>													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">10. Title</th> <th style="width: 30%;">Managing Members/Managers</th> <th style="width: 30%;">Business Street Address</th> <th style="width: 30%;">City, State and Zip Code</th> </tr> <tr> <td>MGR</td> <td>PALUMBO, WENDY</td> <td>4691 N. UNIVERSITY DRIVE,</td> <td>CORAL SPRINGS FL</td> </tr> </table>						10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGR	PALUMBO, WENDY	4691 N. UNIVERSITY DRIVE,	CORAL SPRINGS FL
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2000002864422-5 -05/06/99--01003--021 ****188.75 ****188.75 													
<b>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.</b> SIGNATURE: <u>Wendy Palumbo</u> <u>4/23/99</u> 954-227-9993													