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 Katherine Harris ANNUAL REPORT FILED Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAY -3 PM 12: 56 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 | Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # L98000001537 TÄLTÄHÄSSEL, FLÖRIĞA 1a. Principal Place of Business Address ROI CAPITAL, L.L.C. 12141 TUMBLEWEED COURT 12141 TUMBLEWEED COURT WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 08/21/1998 FLSuite, Apt. #, etc. Suite, Apl. #, etc. 4. FEI Number Applied For City & State City & State 65-0864554 Not Applicable 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office O'TOOLE, RAYMOND F 12141 TUMBLEWEED COURT Street Address (P.O. Box Number is Not Acceptable) WEST PAIM BEACH FL 33414 400002871484--Suite, Apt. #, etc. -05/11/99--01063--**-0**08 \*\*\*\*188.75 \*\*\*\*188.7 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. SIGNATURE \_\_\_\_\_ DATE (Registered Agent Accepting Applierment). (31-91. Registered Agent signature region byteo regist design 10. Title Managing Members/Managers City, State and Zip Code **Business Street Address** MGR O'TOOLE, RAYMOND F 12141 TUMBLEWEED COURT WEST PALM BEACH FL MGR O' TOOLE, BARBARA A 12141 TUMBLEWEED COURT WEST PALM BEACH FL

11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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:

aymond J. O'loale

4/27/99 793-933