

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 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 # L98000001539 Americana International, LLC 1608 Town Center Blvd. Unit B Weston, Florida 33326		1a. Principal Place of Business Address 1608 Town Center Blvd. Unit B Weston, Fl. 33326	
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 08/21/98		3a. State of Formation Florida	
4. FEI Number 52-2116207		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent Kenneth Goss 3487 Derby Lane Weston, Florida 33331		8. Name and Address of New Registered Agent/Office 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 <i>Kenneth M Goss</i> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)		DATE 6-17-99	
10. Title Managing Members/Managers mcm Kenneth Goss mcm Robert Castellano		Business Street Address 3487 Derby Lane 3900 Bonaventure Blvd.	
		City, State and Zip Code Weston, Fl. 33331 Weston, Fl. 33332	
		4000002922754--9 -07/02/99--01096--007 ****188.75 ****188.75	
		AL JUN 25 1999	
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: <i>Kenneth M Goss</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date 6-17-99 954-349-7023 Da/time Phone #	