
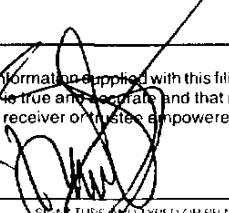


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE 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 # L98000001666 INTERNATIONAL HOMES-PRESERVE, L.C. 15800 S.W. 88TH STREET MIAMI FL 33196		1a. Principal Place of Business Address 15800 S.W. 88TH STREET MIAMI FL 33196	
2. Principal Place of Business 5220 NW 107 AVE Suite, Apt. #, etc. City & State MIAMI, FL Zip 33178	2a. Mailing Address 5220 NW 107 AVE Suite, Apt. #, etc. City & State MIAMI, FL Zip 33178	3. Date Organized or Qualified 08/31/1998	3a. State of Formation FL
		4. FEI Number 65-0860995	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent STRELITZ, BRIAN L 15800 S.W. 88TH STREET MIAMI FL 33196		8. Name and Address of New Registered Agent/Office Name SAME Street Address (P.O. Box Number is Not Acceptable) 5220 NW 107 AVE Suite, Apt. #, etc. City MIAMI, FL Zip Code 33178	
9. Pursuant to the provisions of Sections 608.016 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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when resigning)			
10. Title MGR	Managing Members/Managers STRELITZ, BRIAN L	Business Street Address 5220 NW 107 AVE 15800 S.W. 88TH STREET	City, State and Zip Code MIAMI FL 500002870335-8 -05/11/99--01005--019 ****188.75 ****188.75 POSTED PAID
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>Brian Strelitz Managing Member 4-12-99</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, MEMBER OR MANAGER Date: 4-12-99 Signature: 205-640-1152			