		e May 1, 1999 or 00.00 LATE FEE		Liability	Com	pany will be	e				
LIMITE	TY COMPANY EPORT 9	Kath Secr	ENT OF STATE Harris State PORATIONS	FILED SECTIONAY OF STATE OF TURN OF CORPORATIONS							
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE							50 MAC + 3 AM 9: 04				
Name	and Mailing Ad led Liability Co	dress DOOL	# L98000001736			ĺ					
FRANK, EFFMAN, WEINBERG & BLACK, L.L.C. 8000 PETERS ROAD, SUITE 200 PLANTATION FL 33324							1a. Principal Place of Business Address 8000 PETERS ROAD, SUITE 200 PLANTATION FL 33324				
2 Principal Place of Business 2a. M			2a. Mailir	iling Address			3. Date Organized or Qualified			3a. State of Formation	
Suite, Apt. #, etc.			Suite, Apt	Suite, Apt #, etc.			09/0		8/1998 FL		
			City 9 Sto							,	Applied For
City & State			City & Sta	City & State			6. Certificate of Status Desired				
Zip	Country Country		Zip Country			ry	5. Date of Last P			\$8.75 Additional Fee Requ	
	and Address of Curren	Agent 8. Name			L Name and Address of New Regis			stered Agent/Office			
8000	STEVEN A ESS S ROAD, SUI FI 33324	Suite, Apt. #, etc.			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.											
SIGNATU	(Registered Ages) Accepting	Office Registered Agent superfue to 4 a to 1 when to institute (DATE						
10 . Title	Mai	rs	Business Street Address					City, State and Zip Code			
MGRM	FRANK, NEIL G			8000 PETERS ROAD,			SUITE	2	PLANT	NOITA	${ t FL}$
MGRM	EFFMA		8000 PETERS ROAD,			SUITE	2	PLANTA	ATTON	FL	
MGRM	BLACK, DAVID W			8000 PETERS ROAD,			SUITE	2	0 PLANTATION FL		
MGRM	WEINBERG, STEVEN A			8000 PETERS ROAD,			SUITE	2	PLANT	ATION	FL
							Ξ	30	0002 -03/04 ****1	1/990	903- : 8)1885017 ****188.75
11. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3) (i), Fiorida 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: Steven A. Weinberg 2/23/99 (954) 474-8000											

INHSE10 R (12-98)