ANNUAL 19	LITY COMPANY REPORT 1999		RIDA DEPARTMENT OF STATE  Katherine Harris Secretary of State VISION OF CORPORATIONS		FILED 99 APR 29 PM 1: 21	
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 # L98000002136					2F 094 19	ANT UP OTHER
					TALLAHASSEE, FLORIDA	
505 E	RLANDS AUCT . NEW YORK A D FL 32724	ION GALL AVENUE,	ERIES, L SUITE 1	C.	1a. Principal Place of Bu 505 E. NEW DELAND FL	YORK AVENUE, SUI
Principal Place of Business			2a. Mailing Address		3. Date Organized or Ou	ualified 3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt	Suite, Apt #, etc.		10/06/1998 4. FEI Number	FL
City & State		City & Stat	City & State		59-35356	Applied For
<b>Z</b> <sub>i</sub> p	Country	Zip	Co	untry	5. Date of Last Report	6. Certificate of Status Desire \$8.75 Additional Fee Required
7. N	ame and Address of Curi	ent Registered A	gent	B. Name	Name and Address of Ne	w Registered Agent/Office
ts registered office o as registered agent,	rovisions of Sections 608 arregistered agent, or both, is and accept the obligations	16 and 608.508, nothe State of Floring	Florida Statutes, th da. Such change w	ne above-named limite as authorized by affirm	native vote of a majority of the	this statement for the purpose of changing members. I hereby accept the appointment of the purpose of changing members. I hereby accept the appointment of the purpose of changing members.
SIGNATURE (Registered Agent Accepting Apply stricte) It  Title Managing Members/Managers			O'tel Registered Agent signature required when remediating:  Business Street Address		50 Ji	City, State and Zip Code
<del></del>	R INDUSTRIES	, L.L.C	C 505 E. NEW YORK AVENUE, SU DELAND FL			
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