


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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b> 99 MAR 22 PM 12:06 SECRETARY OF STATE TALLAHASSEE, FLORIDA													
<b>FILING FEE</b> \$ 188.75		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>															
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT #</b> L98000002155		1a. Principal Place of Business Address													
SPORTLABS USA, L.L.C. 46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236				46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236													
2. Principal Place of Business 6355. ORANGE AVE. Suite, Apt. #, etc. SUITE 10 City & State SARASOTA FL Zip 34236 Country USA		2a. Mailing Address 6355. ORANGE AVE Suite, Apt. #, etc. SUITE 10 City & State SARASOTA FL Zip 34236 Country USA		3. Date Organized or Qualified 10/07/1998 3a. State of Formation FL 4. FEI Number 65-0899439 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>													
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office															
ROTFEN, REX A 46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236		Name 188.75 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 _____ (DATE _____) <small>(Registered Agent Accepting Appointment) (If Not a Registered Agent, sign as to Agent when first filing)</small>																	
<table border="1"><thead><tr><th>Title</th><th>Managing Members/Managers</th><th>Business Street Address</th><th>City, State and Zip Code</th></tr></thead><tbody><tr><td>MGR</td><td>ROTFEN, REX A</td><td>46 N. WASHINGTON BLVD., #1</td><td>SARASOTA FL</td></tr><tr><td>MGR</td><td>LINDA GEBHARD</td><td>6345. ORANGE AVE #110</td><td>SARASOTA, FL 34236</td></tr></tbody></table>						Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGR	ROTFEN, REX A	46 N. WASHINGTON BLVD., #1	SARASOTA FL	MGR	LINDA GEBHARD	6345. ORANGE AVE #110	SARASOTA, FL 34236
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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>Linda Gebhard</i> 3/17/99 981-364-9609 <small>SIGNATURE AND PRINTED NAME OF DESIGNATED MANAGER OR REGISTERED AGENT</small>																	