


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 # L98000002228 INNOVATIVE FAX SOLUTIONS, L.L.C. 904 DORIA WAY MELBOURNE FL 32940		<div style="text-align: right; margin-bottom: 10px;"> FILED 99 APR 12 PM 3:47 SECRETARY OF STATE TALLAHASSEE, FLORIDA </div> 1a. Principal Place of Business Address 904 DORIA WAY MELBOURNE FL 32940	
2 Principal Place of Business 904 DORIA WAY Suite, Apt. #, etc. City & State MELBOURNE FL Zip 32940	2a. Mailing Address 904 DORIA WAY Suite, Apt. #, etc. City & State MELBOURNE FL Zip 32940	3. Date Organized or Qualified 10/12/1998 4. FEI Number 59-3529620	3a. State of Formation FL <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 DUMSTORF, GEORGE W 904 DORIA WAY MELBOURNE FL 32940		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL	
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>(Required Agent Acting by Appointment) (Required Agent signature required when not listed)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BURNS, DOUGLAS S	1561 BRONCO DR.	MELBOURNE FL
MGRM	BURNS, IMOGENE S	1561 BRONCO DR	MELBOURNE FL
MGRM	DUMSTORF, GEORGE W	904 DORIA WAY	MELBOURNE FL
MGRM	DUMSTORF, STEPHANIE S	904 DORIA WAY	MELBOURNE FL
4-15-99 00002842885-1 -04/16/99--01104--021 ****188.75 ****188.75			
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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>George S Burns</i>			