
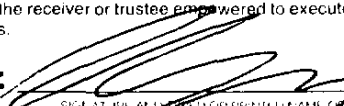


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
<b>1 Name and Mailing Address of Limited Liability Company</b> <b>DOCUMENT #</b> L98000002326  STORE IT HILLSBORO L.L.C. 751 PARK OF COMMERCE DRIVE, SUITE 128 BOCA RATON FL 33487		<b>1a. Principal Place of Business Address</b>  751 PARK OF COMMERCE DRIVE, BOCA RATON FL 33487	
<b>2 Principal Place of Business</b>  Suite, Apt. #, etc.  City & State  Zip Country		<b>2a. Mailing Address</b>  Suite, Apt. #, etc.  City & State  Zip Country	
<b>3. Date Organized or Qualified</b> 10/20/1998		<b>3a. State of Formation</b> FL	
<b>4. FEI Number</b>		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Date of Last Report</b>		<b>6. Certificate of Status Desired</b> \$8.75 Additional Fee Required <input type="checkbox"/>	
<b>7. Name and Address of Current Registered Agent</b>  FLORIDA LAWDOCK, INC. 222 LAKEVIEW AVENUE WEST PALM BEACH FL 33402		<b>8. Name and Address of New Registered Agent/Office</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc. 3000 2892458 -06/02/99-01046-016 City Zip Code ****100-75 ****188.75 <b>FL</b>	
<b>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.</b>			
<b>SIGNATURE</b> _____ <small>(Registered Agent Accepting Appointment) (FEI) (Registered Agent Signature required when changing)</small>		<b>DATE</b> _____	
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>	<b>City, State and Zip Code</b>
MGRM	PECHTER, MARTIN H	3663 CARLTON PLACE	BOCA RATON FL
MGRM	PECHTER, JEFFREY S	3901 OCEAN BLVD.	BOCA RATON FL
MGRM	BLOCK, STEPHEN E	6900 S. GRANDE DRIVE	BOCA RATON FL
<b>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.</b>			
<b>SIGNATURE:</b> 		4-28-99 (561) 982-7770	