File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR 15 ATTI: 19 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SCURETARY OF STAT TALLAHASSEE, FLORIDA **DOCUMENT#** L98000002331 1a. Principal Place of Business Address GAMERA MARKETING, L.C. 118 FLAGSHIP DRIVE 118 FLAGSHIP DRIVE **LUTZ FL 33541** LUTZ FL 33541 2a. Mailing Address 2 Principal Place of Business 3. Date Organized or Qualified 3a. State of Formation 10/19/1998 Suite, Apt #, etc. Suite, Apt #, etc FL Applied For City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office ANDREWS, ROBERT P Street Address (P.O. Box Number is Not Acceptable) 118 FLAGSHIP DRIVE LUTZ FL 33541 Suite, Apt. #, etc. Zio 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE DATE 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM ANDREWS, ROBERT P 118 FLAGSHIP DRIVE LUTZ FL MGRM PEDAPUDL, SAILAJA 4304 GAINSBOROUGH COURT TAMPA FL \$.**#**0002820575__# -03/26/99--01107--023 ****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) (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