


LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

USBRASIL AGENCIES, LLC
3740 BEACH BLVD., SUITE 306
JACKSONVILLE FL 32207

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JACKSONVILLE FL 32207

\$8.75 Additional Fee Required

CORPORATION SERVICE , COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 _____

(Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when board of directors is not present.)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BYRNE, WILLIAM P	529 QUAIL POINTE II 3740 BEACH BLVD Suite 306	PONTE VEDRA BEACH FL JACKSONVILLE, FL 32207 200008912512-1 -09/19/99--01099--015 ***189.75 ***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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE (DO NOT PRINT NAME OF SIGNER, MANAGING MEMBER OR MEMBER) _____

2000

11. *Thymus* **■**