
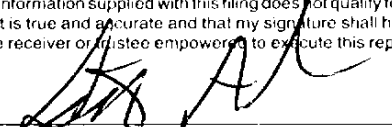


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L98000003258</b>  J&S PROPERTIES OF WESTON, L.L.C. <del>8551 SUNRISE BLVD., SUITE 302</del> <del>PLANTATION FL 33322</del>					
1a. Principal Place of Business Address  <del>8551 SUNRISE BLVD., SUITE 30</del> <del>PLANTATION FL 33322</del>					
2. Principal Place of Business 1575 Northpark Dr. Suite, Apt. #, etc. #100 City & State Weston, FL Zip 33326 Country USA		2a. Mailing Address 1575 Northpark Dr. Suite, Apt. #, etc. #100 City & State Weston, FL Zip 33326 Country USA		3. Date Organized or Qualified 12/17/1998 4. FEI Number 65-088-2009 5. Date of Last Report	
				3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent  FROST, IRWIN M ESQ. 200 SOUTH BISCAYNE BLVD., SUITE 4750 MIAMI FL 33131			8. Name and Address of New Registered Agent/Office Name 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) (NOTE: Registered Agent signature is required when the company is changing its registered office or registered agent, or both.)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	SCHEAR, SCOTT	<del>8551 SUNRISE BLVD., SUITE</del> 1575 Northpark Dr. #100		<del>PLANTATION FL</del> Weston, FL 33326	
MGRM	Schear, Julie	1575 Northpark Dr. #100		Weston, FL 33326	
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:  300002868623--3 -05/07/99--01157--009 ****188.75 ****188.75 5-5-99					