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								
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee					99 KAY - 4 PH 12: 52			
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000003426					SECRETATION OF ATE TALLATIASSIE, FLORIDA			
					1a. Principal Place of Business Address			
9	DELSON ENTERPRIS 009 SEMINOLE BOU EMINOLE FL 33772	LEVARD	9009 CEMINOLE BOULEVARD, SUI SEMINOLE FL 33772					
2 Principal Place of Business 2a. Maili			ng Address		3. Date Organized or Qualified 3a. Sta		3a. State of Formation	
Suite, Apl.	# oi^	Suite A	Suite, Apt #, etc			12/22/1998 FL		
Sulle, Apr.	н, ск.	J Solice, A	Solle, Apr #, elc			4. FEI Number Applied For		
City & State		City & S	City & State		59-354739 5. Date of Last Report			
Ζιρ	Country	Zip	Cour	try	5. Date of Last F	leport	6. Certificate of Status Desired S8 75 Additional Fee Required	
	7. Name and Address of Curre	nt Registered	d Agent		Name and Addres	s of New Regis	tered Agent/Office	
9009	SON, STEVEN G SEMINOLE BOULEVA IOLE FL 33772	RD, SU	ITE 1 Street Addre		s (P.O. Box Number is Not Acceptable)			
				City Zip			Zip Code	
its register as register	nt to the provisions of Sections 608.4 ed office or registered agent, or both, in ed agent, and accept the obligations RE	the State of Fi		authorized by alfirma	tive vote of a majorit			
10. Title	Managing Members/Manag	ers	Busir	ness Street Address		City.	State and Zip Code	
MGR	LINDSEY, PATRICK	L	953 REDFI	ELD ROAD,		100002 -05/1	IR MD 	
indicated o	eby certify that the information supplied n this annual report is true and accura lity company of the receiver or trustee	e and that my	signature shall have the	e same legal effect as	if made under oath	, that I am a mai	naging member or manager of the	
attachment	ATURE:	-1		- Ang	3	1 1 .	4108368726	

Unitra Phone #

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