

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

LIMITED LIABILITY COMPANY		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
ANNUAL REPORT 1999			
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L99000000120</b> E.P.C. AMERICA OF COLORADO LIMITED LIABILITY COMPANY 3356 N.W. 78TH AVENUE MIAMI FL 33122		1a. Principal Place of Business Address 3356 N.W. 78TH AVENUE MIAMI FL 33122	
2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	12/29/1998	FL
City & State	City & State	4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	52-214 7785	5. Date of Last Report
			6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>
7. Name and Address of Current Registered Agent LAMONT & NEIMAN, P.A. ONE BISCAYNE TOWER, SUITE 3550 TWO SOUTH BISCAYNE BLVD MIAMI FL 33131		8. Name and Address of New Registered Agent/Office Name LDRENZO WACES Street Address (P.O. Box Number is Not Acceptable) 4307 SW 8th Street Suite, Apt. #, etc. City miami Zip Code FL 33134	
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 _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	EPC AMERICA LIMITED ,	3356 N.W. 78TH AVENUE	MIAMI FL
800002881818--7 -05/20/99--01085--015 ****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 attachment with an address.			
SIGNATURE: _____		3-18-99 (305) 629-2020	