

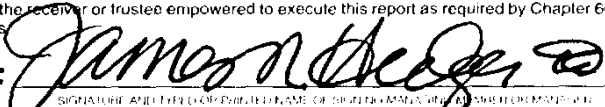


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED APR 20 PM 5:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 DOCUMENT # M94000000018 LJH GLOBAL INVESTMENTS, L.L.C., L.C. 400 5TH AVE SOUTH SUITE 301 NAPLES FL 34102		1a. Principal Place of Business Address 400 5TH AVE SOUTH SUITE 301 NAPLES FL 34102			
2. Principal Place of Business 801 Laurel Oak Drive Suite, Apt. #, etc. Fifth Floor City & State Naples, FL Zip 34108		2a. Mailing Address 801 Laurel Oak Drive Suite, Apt. #, etc. Fifth Floor City & State Naples FL Zip 34108		3. Date Organized or Qualified 03/22/1994 4. FEI Number 65-0431110 5. Date of Last Report 04/23/1998	
				3a. State of Formation DE <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent HEDGES, JAMES R IV 400 5TH AVE SOUTH SUITE 301 NAPLES FL 34102			8. Name and Address of the Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 801 Laurel Oak Drive Suite, Apt. #, etc. Fifth Floor City Naples FL Zip Code 34108		
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 Required for Change of Agent)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	HEDGES, JAMES R IV	400 5TH AVE SOUTH 801 Laurel Oak Drive Fifth Floor		NAPLES FL 34108 7000002853887 -04/27/99--01071--020 ****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)(j), 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:  (941) 5935000					