File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAR -9 PM 1:32

Z/10

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

 Name and Mailing Address of Limited Liability Company

**DOCUMENT # M96000000159** 

U.S. ONLINE COMMUNICATIONS L.L.C. ATTN: LAW DEPT. 1201 3RD AVE., STE. #5400

1a. Principal Place of Business Address

ATTN: LAW DEPT. 1201 3RD AVE., STE. #5400

SEATTLE WA 98101						1201 3RD AVE., STE. #5400 SEATTLE WA 98101				
2. Principal Place of Business 2a. Mail		ng Address			3. Date Organiza	ed or Qualified	3a. State	of Formation		
Suite. Apt. #, etc. Suite. Ap		t # oto		05/06/1996		WA				
Sulte, Apt. #, etc. Suite, Ap		n. +, etc.			4. FEI Number			Applied For		
City & State City & S		City & Sta	ate			91-1689623			Not Applicable	
Zip Country Zip		Country		5. Date of Last Report		6. Certificate of Status Desired				
,						04/11/1997		S8.75 Additional Fire Required		
7. Name and Address of Current Registered Agent					8. Name and Address of New Registered Agent/Office					
NRAI SERVICES, INC. 526 E. PARK AVENUE					Name Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301					· · ·					
					Suite, Apt. #, etc. 300024536432 Suite, Apt. #, etc03/11/3801048005 ****188, 75 ****188, 75					
				City Zip C				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 N/A  IRegistered Agent Accepting Appointment) (NOTE: Registered Agent signature						DATE				
10. Title	· · · · · · · · · · · · · · · · · · ·			Business Street Address			City, State and Zip Code			
									· · · · · · · · · · · · · · · · · · ·	
MGRM	1 PFLEGER, PAUL H		1201 3RD AVE., STE. 54			E. 5400	SEATTL	E WA		
MGRM	AGRM OREHEK, JOHN M		1201 3RD AVE, STE. 54			5400	SEATTLE WA			
MGRM	MCNAMEE, CHARLES		1201	3RD	AVE., STE	E. 5400	SEATTL	E WA		

11. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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 of the powered to execute this report as required by Chapter 608, Florida Statutes; and that my game appears in Block 10, or on an attachment with an address.

8307 Shoal Creek Blvd. STE B

**SIGNATURE** 

MGRM

SOLOMON, ROB

3/2/58 (5/2) 45/-8765 Date Dayline Phone #

Austin, TX 78757