


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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILED</b> <b>SECRETARY OF STATE</b> <b>DIVISION OF CORPORATIONS</b> <b>98 APR -9 AM 8:07</b> <i>24113</i>			
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT # M96000000445</b>	
GARGIULO MEXICO, L.L.C. 15000 OLD US 41 NORTH NAPLES FL 33963		1a. Principal Place of Business Address  15000 OLD US 41 NORTH NAPLES FL 33963	
2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
3. Date Organized or Qualified		3a. State of Formation	
11/12/1996		DE	
4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
51-0362519			
5. Date of Last Report		6. Certificate of Status Desired	
05/01/1997		<input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
ALHAMBRA REGISTERED , AGENT 2 ALHAMBRA PLAZA, SUITE 1202 CORAL GABLES FL 33134		Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City <b>FL</b> 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 _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
<del>MGR</del>	<del>GARGIULO, JEFFREY D</del>	<del>15000 OLD US 41 NORTH</del>	<del>NAPLES FL</del>
MGR	LELEU, CHRISTIAN	15000 OLD US 41 NORTH	NAPLES FL
MGR	AUGUSTINE, JIMMY DR.	15000 OLD US 41 NORTH	NAPLES FL
MGR	SULLIVAN, MICHAEL W.	15000 OLD US 41 NORTH	NAPLES, FL 34110
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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:** Michael W. Sullivan Michael W. Sullivan, MGR 4/6/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #