


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

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LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE \$ 188.75</b> 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>ACCESS AMERICA FINANCIAL, LLC</b> 1525 NW 167TH STREET, SUITE 300 MIAMI FL 33169		DOCUMENT # M98000000022 1b. Principal Place of Business Address 1525 NW 167TH STREET, SUITE MIAMI FL 33169	
2. Principal Place of Business 6100 Hollywood Blvd Suite, Apt. #, etc. Suite 700 City & State Hollywood, FL Zip 33024 Country Brownrd	2a. Mailing Address 6100 Hollywood Blvd Suite, Apt. #, etc. Suite 700 City & State Hollywood, FL Zip 33024 Country Brownrd	3. Date Organized or Qualified 01/12/1998 4. FEI Number 65-0741093 5. Date of Last Report	3a. State of Formation DE <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>
7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code 100002837271--1 -04/13/99--01003--010 ****188.75 ****188.75 FL	
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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required twice in columns 9 & 10)		DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	PERLMAN, JASON E	1525 NW 167TH ST., STE 300 6100 Hollywood Blvd., Ste 700	MIAMI FL Hollywood, FL 33024
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		3/26/99 954 765 100 Date: _____ Telephone: _____	