ENVITED ENTOILITY COMPANY				LORIDA DEPARTMENT OF STATE				(1) (1) (1)
ANNUAL REPORT				Katherine Harris Secretary of State		'		`:
	1999		2.25.55		CORPORATIONS	=	HAY -b	PH 1: 38
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						<u> </u>		4ntr
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9800000073						ĺ		5/7
,	T.T.					1a. Principal Pla	ce of Business	
3	111 SPEEN	TRIPSY MA STREET, M MA 0171	SUITE			111 SPE FRAMING		EET, SUITE 111 01710
2 Principal Place of Business			2a. Mailing Address			3. Date Organize	ed or Qualified	3a. State of Formation
Suite, Apl. #, etc.			Suite, Apt. #, etc.			01/22/1998 TN		
Sune, Apr. #, etc.						4. FEI Number Applied For		
City & State			City & St	ate		62-1727	<u> </u>	
Z ip	Co	untry	Zip	1	Country	5. Date of Last F	leport	6. Certificate of Status Desired S8 75 Additional Fee Required
	7. Name and	Address of Current	Registered	Agent		Name and Address	s of New Regis	
TAMP	A FT. 3360	of Sections 608.416 and agent, or both, in the	and 608.508	, Florida Statutes,	Suite, Apt. #, etc		FL.	Zip Code
	•	prine obligations		rida Such change	was authorized by affirm	ative vote of a majorit		s I hereby accept the appointmen
	JRE		Appending state of	·	·			
SIGNATU				NOTE Beginnered Agenc	was authorized by affirm septition represented to the second susiness Street Address	···	y of the member	
SIGNATU		Heg shried Age it Accepting		NOTE Beginnered Agenc	sgod film en wenne op Jusiness Street Address	···	y of the member	s Thereby accept the appointmen
SIGNATU	Managir	Beginned Age if A copyring ig Members/Manager		1016 Beginnered Age (* E	sgod for region were to consume the second s	SUITE 11	FRAMII	s Thereby accept the appointmen

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