
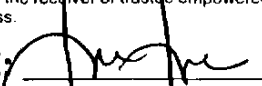


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File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b>  99 MAY -5 AM 9:42  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<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>ULTIMA TRIMMEX, LLC</b> <b>2520 NORTH POWERLINE ROAD, SUITE 305</b> <b>POMPANO BEACH FL 33069</b>		<b>DOCUMENT # M98000000673</b>		1a. Principal Place of Business Address  <b>2520 NORTH POWERLINE ROAD, S</b> <b>POMPANO BEACH FL 33069</b>	
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		2a. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country		3. Date Organized or Qualified <b>06/26/1998</b>  4. FEI Number <b>65-0845188</b> <b>APPLIED FOR</b>  5. Date of Last Report	
7. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE , COMPANY</b> <b>1201 HAYS STREET</b> <b>TALLAHASSEE FL 32301</b>		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 <div style="text-align: right;"><b>FL</b></div>			
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-stating)</small>		DATE _____			
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	UT MANAGEMENT, INC.	2520 NORTH POWERLINE ROAD,		POMPANO BEACH FL	
				<b>600002874636--4</b> <b>-05/13/93--01117--001</b> <b>****188.75 ****188.75</b>  <b>AL APR 12 1999</b>	
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.					
<b>SIGNATURE:</b> 		<b>HECTOR ESCOBAR</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<b>4/19/99 (954) 971-3307</b> <small>Date      Dying Phone #</small>	