	or before May 1, 1999 or I t to a \$ 400.00 LATE FEE.	.imited	d Liability Com	pany will be	•	-			
LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS					FILED 99 APR -7 PH 5: 00				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address of Limited Liability Company OF Limited Liability Company OF Limited Liability Company					FOLLY C. H. J.				
ENVIROCON INTERNATIONAL, L.L.C. 1335 "B" STREET TAMPA FL 33606					1a. Principal Place of Business Address 1335 "B" STREET TAMPA FL 33606				
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Tam Pa FL Zip Country Suite, Apt. Su			Ate Par FL Country		3. Date Organized or Qualified 09/23/1998 4. FEI Number 36-4226486 5. Date of Last Report		3a. State of Formation I L Applied For Not Applicable 6. Certificate of Status Desired		
33634 USA 3363 7. Name and Address of Current Registered Ag			 		Name and Address of New Regist		\$8 75 Additional Fee Required		
LEXIS DOCUMENT SEVIC, ES INC. 3953 WW KELLEY ROAD TAILAHASSEE FI, 32311 Street Address (P.O. Box Number is Not Acceptable) Suite, Apri. #, etc. 04/15/3301101-015 City ****188.7 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 change its registered agent, and accept the abligations.									
			1	Business Street Address			City, State and Zip Code		
MGRM	SNVIROSYS HOLDINGS, L. 1335 "B" 6		STREET		TAMPA FL TGINPO, FL 33639 PPPPPINTTI MAR 0 8 1999				
11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. Hurther 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: X MACC RICHARD 3/19/99 (8/13) 249-220									

INHSE10 R (12-98)