


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 26, 1999 8:00 am  
Secretary of State

03-26-1999 90021 049 \*\*\*150.00

0445485

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000044335					
1. Corporation Name LAND INTERNATIONAL MANAGEMENT CORP.					
Principal Place of Business 100 LOVER LN 201 FT MYERS BCH FL 33931 US			Mailing Address 100 LOVERS LN 201 FT MYERS BCH FL 33931 US		
2. Principal Place of Business 21 1505 S.E. 40 <sup>th</sup> Str. Suite, Apt. #, etc. 22 Suite C City & State 23 Cape Coral FL Zip 24 33904 25 USA		2a. Mailing Address 26 1505 S.E. 40 <sup>th</sup> Str. Suite, Apt. #, etc. 27 Suite C City & State 28 Cape Coral FL Zip 29 33904 30 USA		3. Date Incorporated or Qualified 05/15/1997	
				4. FEI Number 65-0772413	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BERNSTEIN, JEFFREY A 100 N BISCAYNE BLVD STE 1707 MIAMI FL 33132			10. Name and Address of New Registered Agent 81 Name Robert J. La Rocco 82 Street Address (P.O. Box Number is Not Acceptable) 1505 S.E. 40 <sup>th</sup> Str. 83 Suite C 84 City Cape Coral FL 85 Zip Code 33904		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Robert J. La Rocco Robert J. La Rocco DATE 2/10/99 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE D NAME LAND, WERNER STREET ADDRESS 1661 ESTERO BLVD STE 22 CITY-ST-ZIP FT MYERS BCH FL 33931			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. I 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3/23/99 941-549-9499  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2F034 (11/98)