


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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V16279 (4)					
1. Corporation Name BAMCO IV, INC.					



Principal Place of Business 16299 BISCAYNE BLVD N MIAMI FL 33180 US		Mailing Address 3053 NORTH OCEAN BLVD. FT. LAUDERDALE FL 33306 US	
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/25/1992	
21 Suite, Apt. #, etc.		26 2333 N. STATE ROAD 7		4. FEI Number 65-0343197	
22 City & State		27 SUITE # E		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 MARGATE, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 33063		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		30 BROWARD			

9. Name and Address of Current Registered Agent MANGNITZ, BERNIE 3053 NORTH OCEAN BLVD. FT. LAUDERDALE FL 33306				10. Name and Address of New Registered Agent			
				81 Name BERNIE MANGNITZ			
				82 Street Address (P.O. Box Number is Not Acceptable) 2333 NORTH STATE ROAD 7			
				83 SUITE # E			
				84 City MARGATE FL 85 Zip Code 33063			

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 *B. Mangnitz* 4-22-98
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	P S T D
NAME	MANGNITZ, BERNIE	1.2 NAME	BERNIE MANGNITZ
STREET ADDRESS	2730 N E 30TH AVE	1.3 STREET ADDRESS	2333 N. STATE ROAD 7, SUITE # E
CITY-ST-ZIP	LIGHTHOUSE POINT FL	1.4 CITY-ST-ZIP	MARGATE, FL 33063
TITLE	D	2.1 TITLE	
NAME	MANGNITZ, BERNIE	2.2 NAME	
STREET ADDRESS	2730 N E 30TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE POINT FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE *B. Mangnitz* 4-22-98 964 9-7-98

CP2E034 (10/97)