


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	FILED <i>W4/21</i> 98 APR 20 PM 1:13 SECRETARY OF STATE TALLAHASSEE FLORIDA
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 DOCUMENT # Z00140 SCHOONER OAKS LIMITED COMPANY 1185 LAKESHORE ROAD EAST MISSISSAUGA, ONTARIO CANADA L5E 1G1		1a. Principal Place of Business Address 1185 LAKESHORE ROAD EAST MISSISSAUGA, ONTARIO CANADA L5E 1G1	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3a. State of Formation FL 3. Date Organized or Qualified 10/26/1989 4. FEI Number 98-0106166 5. Date of Last Report 02/26/1997 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent PORCH, C.E. 1273 NW SPRUCE RIDGE DRIVE STUART FL 34994		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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 _____		DATE _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
M	NAPEV CONSTRUCTION L,	1185 LAKESHORE RD E	MISSISSAUGA, ONTARIO
M	VEPAN LEASHOLDS LIM,	1185 LAKESHORE RD E	MISSISSAUGA, ONTARIO
			300002497749--9 -04/23/98--01049--008 ****188.75 ****188.75
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.			
SIGNATURE: _____		Date <i>April 13/98</i> Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			