

FILE NOW: Fee after May 1, will be \$263.75

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AND
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LIMITED LIABILITY COMPANY
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee
\$ 238.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT #200609**

US, LIMITED COMPANY
2170 SUNNYDALE BLVD.
SUITE W
CLEARWATER FL 34625

1a. Principal Place of Business Address
2170 SUNNYDALE BLVD.
SUITE W
CLEARWATER FL 34625

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

2. Mailing Address		2a. Principal Place of Business		3. Date Organized or Qualified	3a. State of Formation		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/06/1992	FL		
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		
Zip	Country	Zip	Country	59-3131078			
7. Name and Address of Current Registered Agent				5. Date of Last Report	6. Certificate of Status Desired		
SUNUS CORPORATION, 2170 SUNNYDALE BLVD. SUITE W CLEARWATER FL 34625				02/03/1994	\$8.75 Additional Fee Required <input checked="" type="checkbox"/>		
				8. Name and Address of New Registered Agent			
				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
Suite, Apt. #, etc.							
City		Zip Code					
				FL			

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 reappointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	SUNUS CORPORATION,	2170 SUNNYDALE BLVD., #W	CLEARWATER FL

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***247.50 ***247.50

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3) (k), 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 600, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: by: Valerio J. Niek 2/23/95 813-447-7500
ORIGINATOR AND TYPED OR PRINTED NAME OF REPORT MANAGER, MANAGING MEMBER Date Daytime Phone #

INT158210 R(12-04) Valerio J. Niek, President of SUNUS CORP., its designated manager