


FILE NOW: Fee after May 1, will be \$588.75

FILED

97 APR 17 AM 11:07

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



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

FILING FEE \$ 203.75 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: **FLORIDA DEPARTMENT OF STATE**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Limited Liability Company
DOCUMENT #L96000000197

VERES INVESTMENT, L.C.
6301 COLLINS AVENUE
SUITE 2703
MIAMI FL 33140

1a. Principal Place of Business Address

940 LINCOLN ROAD
MIAMI BEACH FL 33139

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

2 Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Organized or Qualified
02/21/1996

3a. State of Formation
FL

4. FEI Number
65-0663059

5. Date of Last Report
03-31-96

6. Certificate of Status Desired
 Applied For
 Not Applicable
 Additional Fee Required

7. Name and Address of Current Registered Agent

SUGAR, EDMOND L ESQ.
950 SOUTH FEDERAL HIGHWAY
HOLLYWOOD FL 33030

8. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City

200002150372-5
-04/22/97-01039-009
***203.75 ***203.75

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
MGRM	VERES, GORGY	940 LINCOLN ROAD	MIAMI BEACH FL
MGRM	VERES, FERENC	940 LINCOLN ROAD	MIAMI BEACH FL
MGRM	MICROBROKER RT.,	HUVOSVOLGYI UT 75/A	1021 BUDAPEST HUNGARY

JB4-18-97

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: _____ *[Signature]* Date 04/09/97 Daytime Phone # (305)868-4595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #