


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

**APPROVED  
AND  
FILED**

1997 JUN 24 AM 8:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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<b>FILING FEE</b> \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company **DOCUMENT #** L96000000240

New Dolphin Trading, L.C.  
 601 Brickell Key Drive  
 Suite 805  
 Miami, Florida 33131

1a. Principal Place of Business Address

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

2. Principal Place of Business	2a. Mailing Address
542 Lincoln Road	542 Lincoln Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Miami Beach, FL	Miami Beach, FL 33139
Zip	Country
33139 USA	33139 USA

3. Date Organized or Qualified	3a. State of Formation
March 1, 1996	Florida
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
65-0646941	
5. Date of Last Report	6. Certificate of Status Desired
	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent

Josh N. Bennett, Esq.  
 c/o Schantz, Schantzman, Aaronson & Cahan  
 Suite 1050, First Union Financial Center  
 200 South Biscayne Blvd.  
 Miami, Florida 33131-2394

8. Name and Address of New Registered Agent

Name: Gerardo Vazquez  
 Street Address (P.O. Box Number is Not Acceptable): 601 Brickell Key Drive  
 Suite, Apt. #, etc.: Suite 805  
 City: Miami FL Zip Code: 33131

9. Pursuant to the provisions of Sections 608.415 and 608.500, 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 6-23-97

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR.	CORNELIUS BAAKER	542 LINCOLN RD	MIAMI BEACH FL 33139

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 \*\*\*\*203.75 \*\*\*\*203.75

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 \_\_\_\_\_ Daytime Phone # \_\_\_\_\_