


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

APPROVED
AND
FILED

97 APR 28 AM 10:32

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1 Name and Mailing Address of Limited Liability Company
DOCUMENT # L96000001096

7800 NE 2ND AVE, L.C.
419 W. 49TH ST. #106
HIALEAH FL 33012-3602

1a. Principal Place of Business Address

419 W. 49TH ST. #106
HIALEAH FL 33012

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
10/16/1996

3a. State of Formation
FL

4. FEI Number
65-0704605

Applied For
 Not Applicable

5. Date of Last Report

6. Certificate of Status Desired
 \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

7155 NW 2ND CT., L.C.
419 W. 49TH ST. #106
HIALEAH FL 33012

8. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc. ~~000002162230-2~~
City ~~05/02/97-01057-017~~
Zip Code ~~****203.75 ****203.75~~
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 reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	FISHER, RONALD P	1801 CENTURY PARK E., #2400	LOS ANGELES CA 90067
MGR	FISHER, JAMES Q	1801 CENTURY PARK E., #2400	LOS ANGELES CA 90067
MGR	FISHER, RICHARD J	1801 CENTURY PARK E., #2400	LOS ANGELES CA 90067

A. Alan
4/28/97

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: *James Q. Fisher* **JAMES Q. FISHER** 3/10/97 3055566627
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #