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

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

r'		3+
	FILEC)
S	ECRETARY O	FSTATE
DIVI	ECRETARY O SION OF COR	PORATIONS
DITI	SION OF DOIL	ONWINE

98 MAY -8 PM 3: 28

1. Name and Malling Address of Limited Liability Company DOCUMENT # 200301.											
CARNICON-VENEZUELA HOTEL CONSULTANTS, L.C. 3250 MARY STREET SUITE 500 MIAMI FL 33133						1a. Principal Place of Business Address 3250 MARY STREET SUITE 500 MIAMI FL 33133					
2. Principal Place of Business 2a. Mailir		2a. Mailin	ng Address			3. Date Organized or Qualified		3a. State	of Formation		
Suite, Apt. #, etc. Suite, Apt		i. #, etc.			10/01/1990 4. FEI Number		FL Applied For				
City & Stat	e		City & Sta	ute .		-	65-0252096		Not Applicable		
Zip	p Country Zip		Country			5. Date of Last Report		6. Certificate of Status Desired SB 75 Additional Fee Required			
								04/03/1			
	7. Name	and Address of C	urrent Registered	Agent			8. N	me and Addres	s of New Regis	tered Agent	/Office
PELTZ, ARVIN, ESQ.					Name						
	MARY S	T.				Street Address (P.O. Box Number is Not Acceptable)					
SUITE 500 MIAMI FL 33133				Suite, Apt. #, etc. 50002522575— *****188.75 ****188			1002018				
					City Zip Code				****100,13		
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				reinstating)		DATE		<u>-</u>			
10. Title	Managing Members/Managers		Business Street Address			City, State and Zip Code					
мем	CSMC M	IANAGEMEN	T SERV,	3250	MARY	ST.,	STE	. 500	IMAIM	FL	
MGR	STURGE	S, ROBER	T	3250	MARY	ST.,	STE	. 500	MIAMI	FL	
MGR	WEISER, SHERWOOD		3250	MARY	ST.,	STE	. 500	IMAIM	FL		
MGR	LEFTON, DONALD		3250	MARY	ST.,	STE	. 500	MIAMI	FL		
MGR	TEMLING W. PETER,		3250	MARY	ST.,	STE	. 500	IMAIM	FL	400	
MGR	HEWITT	THOMAS	F	3250	MARY	ST.,	STE	500	MIAMI	FL	150

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. If urther 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.

S	IGI	Ν	Αī	ΓL	JR	E

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

W. PERER TEMUPO 4/21/98 305-445-2493
AGER Day: mic Phone #