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2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

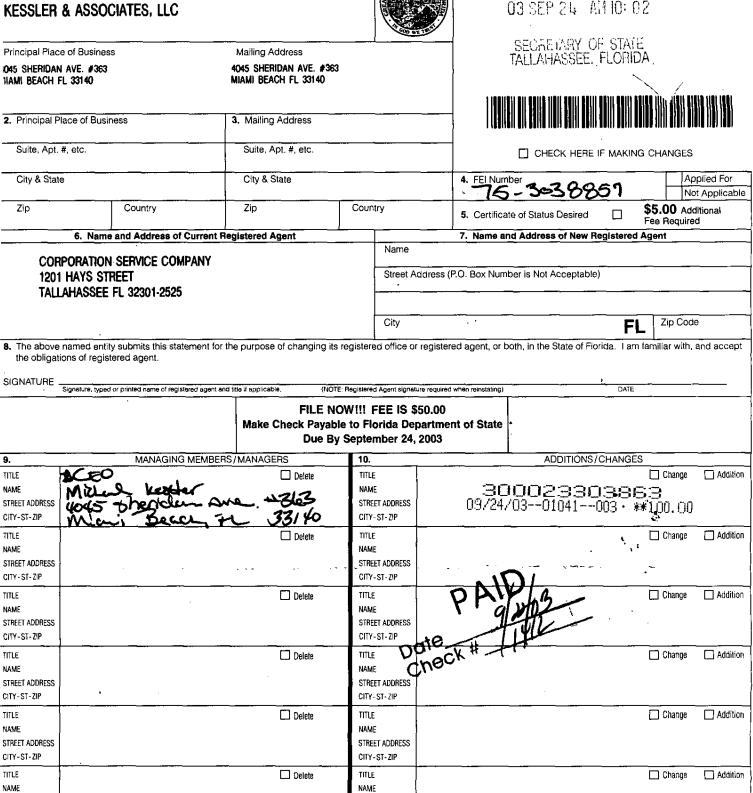
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i. Entity Name

STREET ADDRESS

CITY-ST-ZIP

Kessler	& <i>F</i>	\SSO	CIAT	ES,	LLC
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11. I 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 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: ER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Davtime Phone #

CR2E083 (4/03)