


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAY -7 PM 1:54 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company PARAMONT AUTO FINANCE LLC P.O. BOX 41-4837 MIAMI BEACH FL 33141-0837		DOCUMENT # L92000000050 1a. Principal Place of Business Address 140-71ST ST MIAMI BEACH FL 33141			
<small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.</small>					
2. Principal Place of Business Suite, Apt. #, etc. 1111 KANG CONCOURSE #G10 City & State BAY HARBOR FL Zip 33154 Country DADE		2a. Mailing Address Suite, Apt. #, etc. P.O. BOX 402188 City & State MIAMI BEACH FL Zip 33140 Country DADE		3. Date Organized or Qualified 2/09/1992 3a. State of Formation FL 4. FEI Number 65-0305085 5. Date of Last Report 04/29/1996 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> Additional Fee Required	
7. Name and Address of Current Registered Agent WASERSTEIN, RICHARD 913 NORMANDY DR MIAMI BEACH FL 33141		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
M	RAIJMAN, MILTON	140-71ST ST 1111 KANG CONCOURSE #G10		MIAMI BEACH FL BAY HARBOR FL 33154	
M	THE FINANCE TRUST,	140-71ST ST 1111 KANG CONCOURSE #G10		MIAMI BEACH FL BAY HARBOR FL 33154	
400002178454--7 -05/14/97--01090--007 ****203.75 ****203.75 JB5-13-97					
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: _____		MILTON RAIJMAN 4/27/97 868 8284			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>		<small>Daytime Phone #</small>	