



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee <b>\$ 188.75</b> Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L92000000075</b>  JUPITER SHOPPING CENTER ASSOCIATES, L.C. 1401 BRICKELL AVENUE SUITE 630 MIAMI FL 33131					
1a. Principal Place of Business Address  1401 BRICKELL AVENUE SUITE 630 MIAMI FL 33131					
2 Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/29/1992	
City & State		City & State		3a. State of Formation	
Zip		Zip		FL	
Country		Country		4. FEI Number	
				65-0380446	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				03/26/1998	
				6. Certificate of Status Desired	
				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent/Office		
LEVENSHON, IRA M % M2 REALTY CORPORATION 1401 BRICKELL AVENUE, SUITE 630 MIAMI FL 33131			Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Zip Code <b>FL</b>		
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>(If Registered Agent Accepting Appointment) (NOT: Registered Agent Signature required when making change)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
M	LEWIN, NATHAN	PROMENADEPLATZ 12 D-8000		MUENCHEN 2, GERMANY	
M	GENAUER, MARTIN	2 ALHAMBRA PLAZA, SUITE 12		CORAL GABLES FL	
300002799099-4 -03/09/99 -01045 -016 ****188.75 ****188.75					
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:  2/22/99 305 445 3545					