

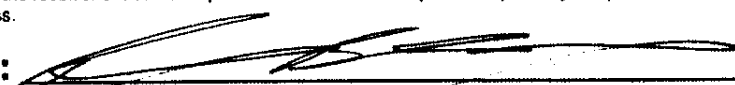


**FILE NOW: Fee after May 1, will be \$588.75**

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT #</b> L93000000065			
2129 WASHINGTON AVENUE, L.C. 12555 BISCAYNE BLVD. #800 NORTH MIAMI FL 33181		1a. Principal Place of Business Address  12555 BISCAYNE BLVD. #800 NORTH MIAMI FL 33181			
2. Principal Place of Business Suite, Apt. #, etc.		2a. Mailing Address Suite, Apt. #, etc.		3. Date Organized or Qualified 03/12/1993	
City & State		City & State		3a. State of Formation FL	
Zip		Country		4. FEI Number 65-0436901	
				5. Date of Last Report 04/22/1996	
				6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				7. Date of Last Report 04/22/1996	
				8. Certificate of Status Desired <input type="checkbox"/> Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent			
CARMEL, RICHARD B 12555 BISCAYNE BLVD. #800 NORTH MIAMI FL 33181		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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
M	CARMEL, RICHARD B	12555 BISCAYNE BLVD. #800		NORTH MIAMI FL	
M	CARMEL, HOWARD	12555 BISCAYNE BLVD. #800		NORTH MIAMI FL	
300002193053--9 -05/28/97--01051--007 *****203.75 *****203.75 					
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:  4/28/97 (305) 8930300 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #					