


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

**APPROVED
AND
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1997 MAR 10 AM 8:25

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
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 MABU, L.C. C/O BERNARD V. MAZZEO, C.P.A. 8900 SW 117TH AVE., STE. B-104 MIAMI FL 33186		DOCUMENT # L93000000134	
1a. Principal Place of Business Address 8900 SW 117TH AVE. STE. B-104 MIAMI FL 33186		3. Date Organized or Qualified 05/04/1993	
2 Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3a. State of Formation FL 4. FEI Number 65-0406522 5. Date of Last Report 02/29/1996	
2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		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 MAZZEO, BERNARD V 8900 SW 117TH AVE. B-104 MIAMI FL 33186		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL	
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
MEM	VARIA, LORENZO	8900 SW 117TH AVE., STE. B	MIAMI FL
MEM	CRAVETTO, MARIE A	8900 SW 117TH AVE., STE. B	MIAMI FL
			600002110506--3 -03/11/97--01129--006 ****203.75 ****203.75 VSP 3/11/97
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: <u>Lorenzo Varia</u> <u>03/05/97</u> (305) 595-7111 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #			