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

						•		1
LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS						FILED		
FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee						97 APR 29 PM 2: 19		
A COO TE MALL CHARLED TO EL COUDA DEDADTHEAT OF CTATE								
1 Name and Mailing Address of Limited Liability Company DOCUMENT #I,93000000224						SECRETARY OF STATE TALLAHASSEE, FLORIDA		
1000000011						1a. Principal Place of Business Address		
HARWIN GREEN INVESTORS, L.C.								
						NADIA S. EDWARDS, CPA		
						290-174TH ST., SUIT 1510 MIAMI BEACH FL 33160		
MINII DEACH IN 33100								
It above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a. 2 Principal Place of Business 2a. Mailing Address						3. Date Organized or Qualified 3a. State of Formation		
2 Princip	ear Place of Business	Za. Maning	2a. Mailing Address					
Suite, Apt	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.			D6/28/1993 FL		
						4. FEI Number		Applied For
City & Sta	te	City & State	City & State			65-0425785		Not Applicable
L				N		5. Date of Last Report	6. Cer	tificate of Status Desired
Zip	Country	Zip]`	Country		07/04/4000	\$8.7%	Additional Fee Regured
<u> </u>	7. Name and Address of C	urrent Registered Ac	ent .			07/01/1996 8. Name and Address of	New Registere	d Acent
			, , , , , , , , , , , , , , , , , , , ,	Name				
NADIA S. EDWARDS CPA,								
						P.O. Box Number is Not Acceptable)		
SUITE 1510 MIAMI FL 33131 Suite, Apt *, etc.								
City						•		
						Zip Code		
							FL	
its registe	ant to the provisions of Sections 60 red office or registered agent, or bot	h, in the State of Florida						
as registe	red agent, and accept the obligation	ns.					,	
SIGNATU	JRE							
10. Title	(Registered Agent Ac Managing Members/Mi	cepting Appointment) (NOT		signature required w Business Street		91	City State a	and Zip Code
TO. THE	managing members me	mayers			AUGIES		Oily, Olaib B	ino zip oode
MEM :	R.V. PARK ASSOC	IATES, 29	0-174T	H ST.,	SUIT	E 1510 MIAM	I FL	
MEM	EM RUHL, DAN H JR. HCR BOX 6400					\$T.	GEORGE	ISLAND FL
MEM					'n		00000	
LITE IAI	RUHL, BARBARA	n C	HCR BOX 640			\$T.	GEORGE	ISLAND FL
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						-0	5/07/97- ***203.7	91475 -01044008 5 ****203.75
		}				.,		(N)
<u> </u>	Ĺ				·			1655-97
11. I do he	areby certify that the information subj on this annual report is true and acc	olied with this filing doe curate and that my slor	s not qualify for nature shall hav	the exemption s	stated in Se al effect as	ection 119.07(3) (i), Florida S s if made under oath; that I a	tatutes. I further m a managing n	certify that the information namber or manager of the
limited lial	bility company or the receiver or true	stee empowered to ex	ecute this repo	rt as required by	/ Chapter t	608, Florida Statules; and th	at my name apr	ears in Block 10, or on an
CICA	IATURE: Madin	C 99 Cand	- RUP	ab Acca	.*	ய/•	d97 (3	105 1932 - 3325

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER