
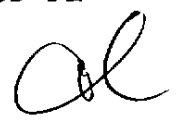



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 12 APR 21 PM 5:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L9300000414 EMERALD LAKE PLAZA, L.C. 3990 SHERIDAN STREET, SUITE 209 HOLLYWOOD FL 33021		1a. Principal Place of Business Address 3990 SHERIDAN STREET, SUITE HOLLYWOOD FL 33021			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip		3. Date Organized or Qualified 11/24/1993 4. FEI Number 65-0448483 5. Date of Last Report 03/02/1998	
				3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent BERMAN, STEVEN 3990 SHERIDAN STREET, SUITE 209 HOLLYWOOD FL 33021			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 300002858773 Suite, Apt. #, etc. -04/30/99-01104-005 ****188.75 ****188.75 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 _____ <small>(Signature of Agent Accepting Appointment, (Full, Registered Agent, or Other Person Authorized)</small>			DATE _____		
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	BERMAN, HOWARD B	3990 SHERIDAN ST SUITE 209		HOLLYWOOD FL	
MGRM	BERMAN, SUSY	3990 SHERIDAN ST SUITE 209		HOLLYWOOD FL	
MGRM	BERMAN, STEVEN B	3990 SHERIDAN ST SUITE 209		HOLLYWOOD FL	
MGRM	BATIEVSKY, ABRAHAM	3990 SHERIDAN ST SUITE 209		HOLLYWOOD FL	
MGRM	BOUR, MARCIE D	3990 SHERIDAN STREET, SUI		HOLLYWOOD FL	
MGRM	BERMAN, ROBIN E	3990 SHERIDAN STREET, SUI		HOLLYWOOD FL	
					
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 person 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:  VICE PRESIDENT 4/15/99 951-981-7744 <small>(Signature of Agent Accepting Appointment, (Full, Registered Agent, or Other Person Authorized)</small>					