


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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REC'D FILED STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 OCT -9 PM 2:02

FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT # L94000000076
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NORTHWEST CHILD CARE SERVICES, L.C.

~~4517 N.W. 31st Avenue~~
~~Ft. Lauderdale, FL 33309~~

1a. Principal Place of Business Address

~~4517 N.W. 31st Avenue~~
~~Ft. Lauderdale, FL 33309~~

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business 621 NW 53rd St. Suite, Apt. #, etc. Suite 450 City & State Boca Raton, FL Zip 33487	2a. Mailing Address 621 NW 53rd Street Suite, Apt. #, etc. Suite 450 City & State Boca Raton, FL Zip 33487
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3. Date Organized or Qualified 01/27/94	3a. State of Formation FL
4. FEI Number 65-0468715	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 05/01/1996	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent Weissman, Michael 4517 N.W. 31st Avenue Ft. Lauderdale, FL 33309

8. Name and Address of New Registered Agent Name Neesa B. Warlen, Esq. Street Address (P.O. Box Number Is Not Acceptable) 621 NW 53rd Street Suite, Apt. #, etc. Suite 450 City Boca Raton FL Zip Code 33487

9. Pursuant to the provisions of Sections 608.416 and 608.506, 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 Neesa B. Warlen DATE 8/13/97
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
D MGR	WEISSMAN, MICHAEL	4517-NW-31st-Ave	400002319844-9
D MGR	JOHN FLOEGEL	621 NW 53rd St., #450	-10/14/97--01039--001
D MGR	WEISSMAN, RICHARD S.	-4517-NW-31st-Ave	***2316.25.***588.75
D MGR	MORRIS, ROBERT H.	621 NW 53rd St., #450	-Ft. Lauderdale, FL
D	MORRIS, CYNTHIA S.	6418-147th-Ave, SE	Boca Raton, FL
		10301 NW Montreux Drive	Bellevue-WA--
		-6418-147th-Ave, SE	Issaquah, WA
		10301 NW Montreux Drive	Bellevue, WA
			Issaquah, WA

Validated - 588.75

KWM

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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:

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

Date

Daytime Phone #