File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE

LIMITED LIABILITY COMPANY **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company

**DOCUMENT #** 

City & State

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

L94000000194 1a. Principal Place of Business Address BOND FAMILY, L.C. 21 SE FIRST AVE 21 SE FIRST AVE SUITE 800 SUITE 800 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation Suite, Apt. #, etc. Suite, Apt. #, etc.

05/09/1994 4. FEI Number Applied For Not Applicable

65-0496043 5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office

BRENNER, RICHARD M 21 SE FIRST AVE SUITE 800 MIAMI FL 33131

Country

7. Name and Address of Current Registered Agent

Name	 

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #. etc.

City

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.

Country

SIGNATURE \_

City & State

Zip

(Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating)

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BOND, PETER D	21 SE FIRST AVE	MIAMI FL
MEM	BOND, CAROL	21 SE FIRST AVE	MIAMI FL
MEM	BOND, VICTORIA	21 SE FIRST AVE	MIAMI FL
MEM	BOND, AMANDA	21 SE FIRST AVE	MIAMI FL
		•	500002502265 -04/28/9801025005 ****188.75 ****188.7

11. Ido 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 eath; that I am a managing member or manager of the limited liability company or the received or trustee employered 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 OF PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER