

2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After October 8, 1997. If Dissolved, Minimum Amount Due To Reinstate: \$703.75

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LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 OCT 17 PM 12:17

FILING FEE
\$ 588.75
Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L94000000564

CISCO INVESTMENTS, L.C.
8136 S.W 83RD STREET
MIAMI FL 33143

1a. Principal Place of Business Address

8136 S.W 83RD STREET
MIAMI FL 33143

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

2. Principal Place of Business SAHE		2a. Mailing Address		3. Date Organized or Qualified 10/20/1994		3a. State of Formation FL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0534865		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Date of Last Report 04/19/1996		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
Zip	Country	Zip	Country				

7. Name and Address of Current Registered Agent

CASTRO, CARLOS A
1001 S. BAYSHORE DRIVE SUITE 2410
MIAMI FL 33131

8. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
000002324530--1
Suite, Apt. #, etc.
-10/20/97--01129--001
******203.75 ****203.75**
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 _____ 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
MGRM	PEREZ PARRA, RUBEN OCT	8136 S.W 83RD STREET	MIAMI FL
MGRM	PEREZ SILVA, RUBEN HOR	8136 S.W 83RD STREET	MIAMI FL
MGRM	PEREZ PARRA, RUBEN HOR	8136 S.W 83RD STREET	MIAMI FL
MGRM	PEREZ PARRA, ANN GERTR	8136 S.W 83RD STREET	MIAMI 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 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]

Date _____ Daytime Phone # _____

2

CISCO INVESTMENTS, L.C
8136 S.W. 83RD STREET
MIAMI FL 33143.

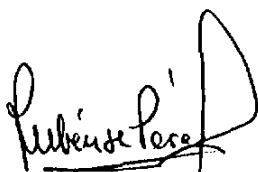
MIAMI AUGUST 28 1997

FLORIDA DEPARTMENT OF STATE:

I received a 2nd notice letter from you department, that says that I have to pay a late fee. For me was a complete surprise because I never receive the first one.

I called to your office and the person who spoke to me said that I have to explain that in written and pay the amount of \$165.65.

I appreciate your help in this matter and please inform me in what month does you send the letter for next time I will be aware.



RUBEN PEREZ SILVA
Manager

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 OCT 17 PM 12:18