FINAL NOTICE: will be dissolved.  LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS  FILING FEE! Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee									ED I AH 9: 2 RY OF STA SSEE FLOR	5	1/24
\$ 588. 1 Name of Limit	75 Ma and Mailing Ad ed Liability Co CISCO 8136 S	dress mpany	OCUME ENTS, L. STREET	ORIDA DEPA NT # 194	RTMEN		ATE	1a. Principal Pi	ace of Business .W 83RD FL 3314	Address STREE	r
2 Principa	al Place of Bus	iness	2a.	Mailing Address			•	3. Date Organia	zed or Qualified	3a. State of	Formation
Surte, Apt. #, etc.  City & State				Suite, Apt. #, etc.  City & State							Applied For
		LCountry			- L Count			65-053 5. Date of Last		6. Certificate	Not Applicable of Status Desired
Zιρ		Country	Zip		Count	ıy		04/13/	1998	S8.75 Addition	Street Missons
	7. Name	and Address o	f Current Regist	ered Agent		Name	8.	Name and Addres		tered Agent/C	ffice
MIAM	I FL 3	3131				Suite, A	nt # alc				
						City	JI. W, OIC.		FL	Zip Code	
its register	ed office or reg		both, in the State			bove-name	d limited	liability company	submits this state	ement for the p	
its register as register	ed office or reg	istered agent, or accept the oblig	both, in the State of ations.		ange was e	bove-name authorized t	od limited by affirma	liability company tive vote of a major	submits this state	ement for the post. I hereby acco	pt the appointment
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SIGNATURE: