
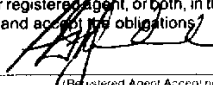
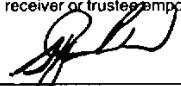


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
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 <b>J.M.D.N. Finance, L.C. 19355 NE 36th Court Ste. 15G N. Miami Beach, FL 33180</b>				DOCUMENT # <b>L94000000575</b>	
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 3a. State of Formation 4. FEI Number <b>65-0560384</b> 5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office Name <b>Ahmed Jamalodeen- current RA</b> Street Address (P.O. Box Number is Not Acceptable) <b>19355 NE 36th Court</b> Suite, Apt. #, etc. <b>Ste. 15G</b> City <b>N. Miami Beach</b> Zip Code <b>FL 33810</b>	
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 <b>08/26/99</b>	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)					
10. Title <b>MGR. Haroun Jamalodeen</b>		Managing Members/Managers <b>19355 NE 36th Court, Ste. 15G</b>		Business Street Address <b>N. Miami Beach, FL 33810</b>	
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: 		H.R. Jamalodeen		08/26/99 (305) 792 6964	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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