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

ANNUAL REPORT 1997 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					FILED	
FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee					97 MAY -1 PM 2: 06	
\$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1 Name and Mailing Address of Limited Liability Company DOCUMENT #L9500000426					SECRETARY OF STATE TALLAHASSEE ELOPIDA	
112	GA VENTURES, 5 N.E. 7TH A IA FL 33004	L.C. VE.			1a. Principal Place of Busin 1125 N.E. 7TH DANIA FL 3300	AVE.
	g address is incorrect in any wa ace of Business		t information and enter correction in Block 2a ing Address		3. Date Organized or Qualit	fied 3a. State of Formation
Suite, Apt. #, etc. Suit			ite, Apt. #, etc.		06/07/1995	<u> </u>
City & State		City & Si	ate		65-0589586	Applied For Not Applicable
Zip	Country	Zip	10	ountry	5. Date of Last Report	6. Certificate of Status Desired
					05/01/1996	58 75 Additional Fee Required
, <u>,</u>	7. Name and Address o	t Current Registered	Agent	Name	8. Name and Address of Ne	w Registered Agent
its registered of	ffice or registered agent, or I igent, and accept the obligi	both, in the State of Fig			ed liability company submits this native vote of a majority of the me	Zip Code statement for the purpose of changing mbers. Thereby accept the appointment
	(Registered Ager	nt Accepting Appointment) (OTE. Registered Agent signature required when reinstating)		tng)	
10. Title Managing Members/Managers			Business Street Address		8	City, State and Zip Code
IGRM GUS	SIATINA, TER	ESA Z	1125 N.E.	7TH AVE.	SOUCO:	FL 2 1784 355 14/9701087005
<u>:</u>						14/9701087005 *212.50 ****212.50
indicated on thi limited liability o attachment with	s annual report is true and a company or the receiver or	accurate and that my trustee empowered to	signature shall have execute this report	the same legal effect as required by Chapte	as if made under oath; that I am :	utes. Hurther certify that the Information a managing member or manager of the my name appears in Block 10, or on an

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

Daytime Phone #