	or before May 1, 1998 t to a \$ 400.00 LATE F		d Liability	Com	npany wi	ll be		_	-u CD	
1	ED LIABILITY COMPANY ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			}	SECRETARY OF STATE DIVISION OF CORPORATIONS				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee							98 MAR -6 PM 1: 11			
\$ 188	.75 Make Check Payab	TMEN	T OF STAT	OF STATE						
of Lim	lted Liability Company DOC CASA VALENCIA RE	AL ESTA	T# L950	0000 AGEM	00532 ENT LI	I TEM	1a Principal Pla	ce of Business	Address	·
ED COMPANY 4400 N.W. 21ST STREET #100 LAUDERHILL FL							4400 N.W. 21ST STREET #100 LAUDERHILL FL			
2. Princip	pal Place of Business	ng Address				3. Date Organize	ed or Qualified	3a. State	e of Formation	
Suite, Apt. #, etc. Suite, Ap			ıt. #, etc.			{	06/29/1995		FL	
City & State City &			State				4. FEI Number Applied For			
			·			65-061924 5. Date of Last Report				
Zip	Country	Zip		Count	try	}	05/05/1	997	58 75 Add	itional Fee Regured
	i Agent		Name	8. N	ame and Addres		tered Ager	nt/Office		
4000 SUIT	BERG, JEFFREY E HOLLYWOOD BLVD E 350 - N YWOOD FL 33021	Street Address (F				P.O. Box Number is Not Acceptable)				
				City			·	Zip Code		
its registe	ant to the provisions of Sections 608.4 red office or registered agent, or both, it red agent, and accept the obligations	n the State of Flo	B, Florida Statute orida, Such chan	es, the a ge was a	bove-named li authorized by a	imited l Iffirmati	ability company su ve vote of a majorit	bmits this state	ement for the rs. I hereby a	e purpose of changing accept the appointment
SIGNATURE										
10. Title	Managing Members/Mana	Business Street Address			iress	City, State and Zip Code			Zip Code	
MGRM	KAHAN, ABRAHAM	4400 N.W. 21ST STF			STR	EET #100	100 LAUDERHILL FL		FL	
MEM	KAHAN, SARA	4400 N.W. 21ST STR			EET #100 LAUDERHILL FL					
MEM	NETES, CHARLES	4400 N.W. 21ST STREET #1			EET #100	O HAUDERHILL FU				
							50	-03/10	452 /98(88.75	1875 1090014 ****188.75
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13. 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. If urther 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:										