


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAR 10 AM 10:55 SECRETARY OF STATE TALLAHASSEE, FLORIDA																																	
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 DOCUMENT # L95000000561 SEVEN'S OF HOLLYWOOD, A LIMITED COMPANY 1500 N. OCEAN DRIVE HOLLYWOOD FL 33019		1a. Principal Place of Business Address 1500 N. OCEAN DRIVE HOLLYWOOD FL 33019																																			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 07/24/1995 4. FEI Number 65-0603917 5. Date of Last Report 04/30/1998																																	
				3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																	
				6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required																																	
7. Name and Address of Current Registered Agent METZGER, AMY 3250 EMERALD POINTE DRIVE 308-B HOLLYWOOD FL 33021 <i>Went address</i>			8. Name and Address of New Registered Agent/Office Name <i>Amy metzger</i> Street Address (P.O. Box Number is Not Acceptable) <i>3535 Magellan Circle-A 522</i> Suite, Apt. #, etc. <i>522</i> City <i>Aventura</i> FL Zip Code <i>33180</i>																																		
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 <i>[Signature]</i> DATE <i>3/8/99</i>																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">10. Title</th> <th style="width: 30%;">Managing Members/Managers</th> <th style="width: 30%;">Business Street Address</th> <th style="width: 30%;">City, State and Zip Code</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>METZGER, AMY</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td>MEM</td> <td>METZGER, AUTHUR</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td>MEM</td> <td>METZGER, GARY</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td>MEM</td> <td><i>Pansi, Jean</i> PANSI, JEAN</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td>MEM</td> <td>LESLIE, METZGER</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td>MEM</td> <td>MELTON, CAROL</td> <td>1500 NORTH OCEAN DRIVE</td> <td>HOLLYWOOD FL</td> </tr> <tr> <td><i>mlh</i></td> <td><i>metzger, Jess</i> METZGER, JESS</td> <td>1500 NORTH OCEAN DRIVE</td> <td>Hollywood FL</td> </tr> </tbody> </table>						10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGRM	METZGER, AMY	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	MEM	METZGER, AUTHUR	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	MEM	METZGER, GARY	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	MEM	<i>Pansi, Jean</i> PANSI, JEAN	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	MEM	LESLIE, METZGER	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	MEM	MELTON, CAROL	1500 NORTH OCEAN DRIVE	HOLLYWOOD FL	<i>mlh</i>	<i>metzger, Jess</i> METZGER, JESS	1500 NORTH OCEAN DRIVE	Hollywood FL
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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: <i>[Signature]</i> DATE <i>3/9/99</i> <i>305-4166-9687</i>																																					