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

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	D LIABILITY COMPANY ANNUAL REPORT 1997		LORIDA DEPARTME Sandra B. Mo Secretary of DIVISION OF CORE	ortham State		FILED			
EU INC		97 JAN 31 PM 4: 19							
	FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					STURN STOTE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT #L9500000642					SECRETARY OF STATE TAIL MHASSEE, FLORIDA				
DC	OUBLE C STABLES	1a. Principal Place of Business Address							
P.O. BOX 299					10590 PINETREE TERR				
SI	EACLIFF NJ 1157	B oynton i	EACH F	L 3343	16				
If above m	nailing address is incorrect in any way, fi								
2. Principal Place of Business 2a. Mailin			ng Address	۸.	3. Date Organize	d or Qualified	3a. State o	of Formation	
529 S. Flocker DR 529 Suite, Apt. #, etc. Suite, Ap SUITC 4H SU			S. Flagle	n DR.	08/21/1995 FL				
SUTTE 4H			rite 4 H	4. FEI Number		Applied For			
LIIVA SIAIA . I CIIVA			ate	65-0611403			Not Applicable		
West	Cohn Bouch F	(- (NO2	Robin Bad	ch tL	5. Date of Last R	eport	6. Certifica	te of Status Desired	
334	Country (25 K	7 Zip 334	YO) COUNT	">SPA	04/05/199	16	SB 75 Additi	onal Fee Required	
	7. Name and Address of Co	urrent Registered			8. Name and Addr		gistered Ag	ent	
20DNA	CUIN TOCKNI			Name				***************************************	
	CCHIA, JOSEPH CRUVIAN COUR T	P.O. Box Number I	Not Acceptab	ile)					
PALM BEACH FL 33480 529 Suite, Apt. #, etc.					10.				
Suite, Apt. #, 6					;				
		116 9	H	Zip Code					
•		ohm Beach, FL 33401							
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.									
SIGNATU	RE (Registered Agentic		DATE	1/25/	51				
10. Title	Managing Members/Ma	anagers	Busine	ss Street Address		City,	State and Z	ip Code	
MGR CORNACCHIA, JOSEPH 401 PERMUL				N COURT		ALM BEACH FL			
l			529 S. Fl.	12. #4H W.		Polm Beach FL			
								33401	
_			:		100	00021)764	1113	
/						-02/04/ ****20	797701)3.75	010028 ****203.75	
						Mo	$^{\circ}$		
						OVAL	Μ'	•	
						1/3	V		
11. Idoher	reby certify that the information supp	olied with this filing d	loes not qualify for the ex	emption stated in Se	iction 119.07(3) (i). F	lorida Statutes.	l further certii	y 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.									
anachmen	t With an Bodress.		, ,	1 /	1/	1 .1	//	56/20	

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