


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

97 APR 30 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
\$ 203.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT #L95000000672

MANA SYSTEMS, L.C.
 7760 WEST 20 AVENUE
 SUITE 21
 HIALEAH FL 33016

1a. Principal Place of Business Address

7760 WEST 20 AVENUE
 SUITE 21
 HIALEAH FL 33016

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		08/29/1995	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For
Zip		Country		65-0614303	<input type="checkbox"/> Not Applicable
				5. Date of Last Report	6. Certificate of Status Desired
				04/19/1996	<input type="checkbox"/> Additional Fee Required

7. Name and Address of Current Registered Agent

ZUNDEL, NATAN
 7760 W. 20 AVE., BAY 21
 HIALEAH FL 33016

8. Name and Address of New Registered Agent

Name: **MAX LEDEPMAN**
 Street Address (P.O. Box Number is Not Acceptable): **7760 W 20 AVE, BAY 21**
 Suite, Apt. #, etc.:
 City: **HIALEAH** FL Zip Code: **33016**

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 **4-28-97**

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	ZUNDEL, NATAN	7760 W. 20 AVE., BAY 21	HIALEAH FL

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****203.75 ****203.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: _____ **MAX LEDEPMAN** **4-28-97** **305-8269971**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #