


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 Katharine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
 99 MAR 16 PH 4: 34
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company DOCUMENT # L95000000767 VENETIA CENTER, L.C. 555 N.E. 15TH STREET SUITE 100 MIAMI FL 33132


1a. Principal Place of Business Address 555 N.E. 15TH STREET SUITE 100 MIAMI FL 33132

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	10/05/1995	FL
City & State	City & State	4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	65-0613325	5. Date of Last Report
		03/09/1998	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent ZARETSKY, LOUIS D 555 N.E. 15TH STREET SUITE 100 MIAMI FL 33132	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City Zip Code FL
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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.

LOUIS ZARETSKY
 REG. AGENT
 DATE: *2/18/99*

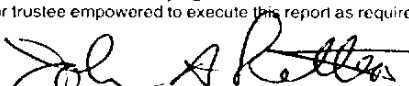
SIGNATURE: 

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	RITTER, JOHN A	555 N.E. 15TH STREET, SUIT	MIAMI FL
MGRM	ZARETSKY, LOUIS D	555 N.E. 15TH STREET, SUIT	MIAMI FL

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3-22-99

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:  *John Ritter* *2/18/99*