


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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company THE HEAVEN GROUP, L.C. 2706 S. HORSESHOE DRIVE #104 NAPLES FL 33942 34103	DOCUMENT # L95000000810
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1a. Principal Place of Business Address 2706 S. HORSESHOE DRIVE #104 NAPLES FL 33942
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2. Principal Place of Business 2950 TAMIANI TRAIL NORTH Suite, Apt. #, etc. City & State NAPLES, FL Zip 34103 Country USA	2a. Mailing Address 2950 TAMIANI TRAIL NORTH Suite, Apt. #, etc. City & State NAPLES, FL Zip 34103 Country USA	3. Date Organized or Qualified 0/30/1995	3a. State of Formation FL
		4. FEI Number 65-0616662	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report 05/01/1996	6. Certificate of Status Desired <input checked="" type="checkbox"/> SB 7: Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent WOLFE, LARRY 200-A JOHN KNOX ROAD TALLAHASSEE FL 32303	8. Name and Address of New Registered Agent Name MR. ANTONIO FAGA Street Address (P.O. Box Number is Not Acceptable) 5801 PELICAN BAY BOULEVARD Suite, Apt. #, etc. SUITE 103 City NAPLES Zip Code FL 34108
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9. Pursuant to the provisions of Sections 608.16 and 608.308, 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 *Antonio Faga* DATE 2/14/97
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	MOBLEY, DAVE	2706 S. HORSESHOE	NAPLES FL
MEM	LANGSAM, ROBERT	2706 S. HORSESHOE	NAPLES FL
	2950 Tamiani Trail North Naples, Florida 34103		
			400002110524--8 -03/11/97--01129--023 ****212.50 ****212.50 POSTED 750 3/11/97

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: *[Signature]* DATE 3/2/97 DAYTIME PHONE # 941-649-6377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER