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

LIMITED LIABILITY COMPANY
ANNUAL REPORT ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

APPROVED

Date

Daytime Phone #

	1997	''			Secretary of ON OF COR	State PORATIONS		1997 FEB	21 AM	12: 11	
FILING \$ 203	FEE And	nual Report \$100.00 eck Payable To	_	SECRETARY OF STATE TALLAHASSEE, FLORIDA							
1. Name	and Mailing Address							. , , , , , , , , , , , , , , , , , , ,			
1. Name and Mailing Address of Limited Liability Company DOCUMENT #L9500000822 PEACEFUL HAVEN HOLDINGS, L.C. 12601 STIRLING RD. FT. LAUDERDALE FL								1a. Principal Place of Business Address 12601 STIRLING RD. PT. LAUDERDALE FL			
	mailing address is incorrect	in any way, line throug				rection in Block 2a.					
2. Princi	2a. Mailing Address SAME					nized or Qualified		Formation			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				10/27/1995 #I. 4. FEI Number				
City & St	ate	City & State				65-0617018					
Zip Country			Zip		Count	lry	5. Date of La	st Report	6. Certificate	of Status Desired	
							06/19/1	996	58 75 Adddrai	ral Eve Required	
	7. Name and Ac	dress of Current R	egistered	Agent		Name	8. Name and A	ddress of New R	egistered Age	nt	
SUITE HOI, LY 9. Pursu its registe as registe	HOLLYWOOD 735 SOUTH WOOD FL 33 mant to the provisions of ered office or registered a ered agent, and accept URE	021. Sections 608.416 an agent, or both, in the S	State of Floi	rida. Such	change was a	Suite, Apt. #, etc. City bove-named limite authorized by affirm	c. d liability compan ative vote of a maj		Zip Code ement for the p rs. I hereby acc	ept the appointment	
10. Title	Managing I	1			ess Street Address		City, State and Zip Code				
MEM MEM MEM	FERNANDEZ, FERNANDEZ, FERNANDEZ,	BLANCA NELSON	(530 100	HOLLYV	LAKEWAY	SOUTH	MIAMI L	akes fi		
MEM	FERNANDEZ,			31.00		VOOD BLVI	70		0970 /97011 03.75 •	10-014 ***203.75	
indicated limited lia	ereby certify that the info on this annual report is ibility company or the re- int with an address.	true and accurate an	d that my s	ignature	shall have the	same legal effect s	is if made under o	ath; that I am a ma	inaging membe iame appears i	or or manager of the	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER IR