
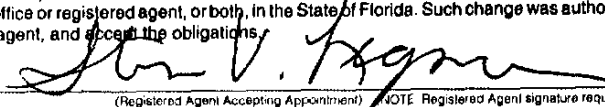
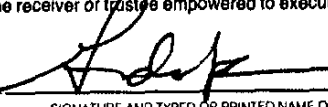


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAR 28 AM 9:41 SECRETARY OF STATE TALLAHASSEE FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company LIGMAN, MARTIN & EVANS, P.L. 230 CATALONIA AVE. CORAL GABLES FL 33134		DOCUMENT # L96000000257			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		1a. Principal Place of Business Address 230 CATALONIA AVE. CORAL GABLES FL 33134	
3. Date Organized or Qualified		3a. State of Formation		4. FET Number	
03/07/1996		FL		65-0408726	
5. Date of Last Report		6. Certificate of Status Desired		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				8. Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent LIGMAN, STEVEN V. 230 CATALONIA AVE. CORAL GABLES FL 33134			8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL		
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 3/13/97		
(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	LIGMAN, DANIEL	230 CATALONIA AVE.		CORAL GABLES FL	
MGRM	EVANS, GORDON J	230 CATALONIA AVE.		CORAL GABLES FL	
MGRM IDOLUBRO JOSEPH W. LIGMAN.					
				500002127505--7 -03/28/97--01110--013 ****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)(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: 		3/13/97		305-445-2682	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Daytime Phone #	