2nd and

2nd and File on or before Sept. 30, 1998 or Limited Liability Company will be FINAL NOTICE: dissolved. If dissolved, minimum amount due to reinstate: \$688.75

LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

1998				Secretary of State DIVISION OF CORPORATIONS			98 JUL 22 PM 4: 06				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$ 588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE											
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000000585							1a. Principal Pla	ece of Rusiness	Address		
CARKAR, L.C. 3051 NO 35TH STREET								3051 NO 35TH STREET			
HOLLYWOOD FL 33021								HOLLYWOOD FL 33021			
2 Principal Place of Business			2a. Mailing Address					3. Date Organized or Qualified 3a. State of Formation			
Suite, Apt #, etc			Suite, Apt. #, etc.				05/24/1996 FL 4. FEI Number Applied For			Applied For	
City & State			City & State					65-0672	896	6. Certificate of Status Desired \$8.75 Additional Fee Required	
Z ip	Country		Žip Cc		Countr	try		5. Date of Last Report			
	7 Name and	Address of Current R	Pagintarad Apant				-	Name and Address	997		
	7. Hame and	Audiess of Children I	10A1910100	Agoni		Name	a. n	Iame and Address	8 OT NOW HOUS	itereo Agen	VOTTICE
HOJ.J.YW	office or registere Lagent, and acce		State of Fior	orida. Such chan	nge was au	City bove-name uthorized b	by affirmati	liability company so live vote of a majorit	ty of the member	rs. I hereby a	e purpose of changing ccept the appointment
10. Title Managing Members/Managers				Business Street Address					City	, State and Z	Zip Code
MGR I	KARTEN,	CAROL		3051 N	NO 35	5TH S	TREE	;	HOLLYW -07/24 ****5	:5:9 -7 :7:80	20751 1006009 ****588.78
11. I do hereby	yccutify that the in	dornation supplied with	this filing d	loes not qualify f	for the exc	emption str	ated in Sec	ction 119.07(3) (i), F	Florida Statutes.	I further cert	lify 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 revewer 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: