


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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
97 APR 21 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

<b>FILING FEE</b> \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company <b>ALLSTEEL PROCESSING, L.C. 2251 S.W. 66TH TERRACE DAVIE FL 33317</b>	<b>DOCUMENT # L96000000591</b>
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1a. Principal Place of Business Address <b>2251 S.W. 66TH TERRACE DAVIE FL 33317</b>
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2. Principal Place of Business <b>SAME</b>	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Organized or Qualified <b>05/28/1996</b>	3a. State of Formation <b>FL</b>
4. FEI Number <b>62-1641811</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent <b>SIMON &amp; SIMON CHARTE, RED 2255 GLADES ROAD SUITE 226-A BOCA RATON FL 33431</b>
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8. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City Zip Code <b>FL</b>

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 \_\_\_\_\_  
(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	GADA MANAGEMENT, L.C.	<b>2300 BARCELONA DRIVE <del>33152 VIA SUELL</del></b>	<b>FT LAUDERDALE, FL <del>BOCA RATON FL</del></b>
MEM	ABBOTT, CHARLES R	<b>14150 S.W. 26TH COURT</b>	<b>DAVIE FL</b>

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\*\*\*\*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:** *Alana Markus* **4/15/97** **954/475-9771**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #