


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
 02 APR -9 PM 5:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$68.75 Corporation Supplemental Fee
\$ 188.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company	DOCUMENT # L96000000591 ALLSTEEL PROCESSING, L.C. 2251 S.W. 66TH TERRACE DAVIE FL 33317
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1a. Principal Place of Business Address 2251 S.W. 66TH TERRACE DAVIE FL 33317

2. Principal Place of Business 1250 N.W. 23rd Avenue Suite, Apt. #, etc.	2a. Mailing Address 1250 N.W. 23rd Avenue Suite, Apt. #, etc.	3. Date Organized or Qualified 05/28/1996	3a. State of Formation FL
City & State Fort Lauderdale, FL Zip Country 33311 Broward	City & State Fort Lauderdale, FL Zip Country 33311 Broward	4. FEI Number 62-1641811	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 04/27/1998		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent SIMON & SIMON CHARTE, RED 2255 GLADES ROAD SUITE 226-A BOCA RATON FL 33431
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8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City <div style="text-align: right;">FL</div> Zip Code
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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) (SOLE Registered Agent Signature required when new filing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	GADA MANAGEMENT, L.C.	2300 BARCELONA DRIVE	FT LAUDERDALE FL
MEM	ABBOTT, CHARLES R	14150 S.W. 26TH COURT	DAVIE FL

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 ***188.75 ***188.75
 T.J.C. APR 15 1999

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 AND TITLE OF FILED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/5/99 954
 587-1900