ANNUAL REPORT			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			SECULIFIARY OF STATE DIVISION OF COMPORATIONS 99 MAY -3 AM 11: 32			
ILING FEE Annual Report \$10 \$ 188.75 Make Check Pay					}	2 2 1 17()	D MITTING	, _	
Name and Mailing Address of Limited Liability Company	CUMENT	# L96	000000	628]				
EXCEL UNION, L.C. 1225 SAN MIGUEL CORAL GABLES FL 33134			19-AR _^		1a. Principal Piace of Business Address 1225 SAN MIGUEL CORAL GABLES FL 33134				
Principal Place of Business	ailing Address			3. Date Organiz		1	Formation		
uite, Apt #, etc.	Suite, Ap	Suite, Apt #, etc			06/04/1996 FL 4. FEI Number				
ity & State	City & Si	City & State			Applied For Not Applicable				
ip Country	Country			Date of Last Report 6. Certificate of Status Desired					
7. Name and Address of C	Current Registered	Anent			05/01/ Name and Addres		1		
Pursuant to the previsions of Sections 66 s registered office or registered agent, or but s registered agent, and accept the obligibility.	08 416 and 608.508	I, Florida Statut rida. Such char	City	named limited	I liability company s	pubmits this sta	Zip Code tement for the pu	irpose of changi of the appointme	
IGNATURE JOME 4 / C		n ne fallete (A				DATE Y/S	SE/8#		
). Title Managing Members/N	lanagers		Business St	rect Address		Cit	y, State and Zip	Code	
MER SANCHEZ, TERE		1225 SAN MIGUEL					GABLES	- - -	
					St	l -05/	28 71 : 11/990: *188.75	1084029	
I do hereby certify that the information surdicated on this annual report is true and ac	curate and that my	signature shall l	have the same	legal effect as	ection 119 07(3)(i), s if made under oatl 608 Flonda Statute	i, that I am a m	anaging member	or manager of t	