
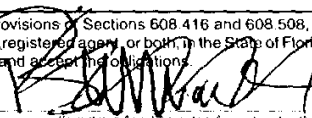
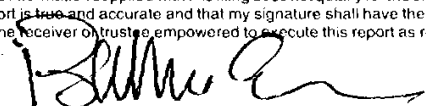


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR 11 PM 1:11	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75		Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # 19600000678 DEWITT STERN CROW, L.C. P.O. BOX 141916 CORAL GABLES FL 33114		1a. Principal Place of Business Address 770 S. DIXIE HWY. 250 CORAL GABLES FL 33146			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip		3. Date Organized or Qualified 06/21/1996 3a. State of Formation FL	
				4. FEI Number 65-0675214 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report 04/09/1998 6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent MAC EWAN, BARRY W 770 S. DIXIE HWY. SUITE 250 CORAL GABLES FL 33146			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 100002806074 City 03/15/93--01103--021 Zip Code ****188.75 State 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 NO CHANGE		
<small>(Registered Agent Accepts Appointment) (F001) (Registered Agent Signature Required When New Group)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	MAC EWAN, BARRY W	770 SOUTH DIXIE HWY. 2ND F		CORAL GABLES FL	
MGRM	STERN, JOLYON	420 LEXINGTON AVENUE STE 2		NEW YORK NY	
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: 			3056658100		