
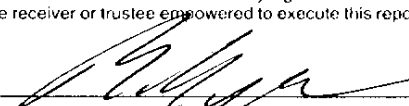


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company VE SOUTH, L.C. 4800 N.W. 15TH AVENUE FT. LAUDERDALE FL 33308		DOCUMENT # L96000000828	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 08/02/1996		3a. State of Formation FL	
4. FEI Number 65-0696794		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 05/01/1998		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent GARSON, LESTER 19403 CHAPEL CREEK BOCA RATON FL 33434		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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 _____ <small>(If Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when removing)</small>		DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	GARSON, BRENT	4020 PAYNE AVENUE	CLEVELAND OH
MGRM	GARSON, REID	4020 PAYNE AVENUE	CLEVELAND OH
MGRM	GARSON, GREG	4020 PAYNE AVENUE	CLEVELAND OH
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:  <small>SIGNATURE AND TITLE OF SECRETARY OF STATE OR REGISTERED AGENT ACCEPTING APPOINTMENT</small>			

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address

4800 N.W. 15TH AVENUE
FT. LAUDERDALE FL 33308

3. Date Organized or Qualified

08/02/1996

3a. State of Formation

FL

4. FEI Number

65-0696794

☐ Applied For

☐ Not Applicable

5. Date of Last Report

05/01/1998

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

GARSON, LESTER
19403 CHAPEL CREEK
BOCA RATON FL 33434

8. Name and Address of New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip 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 _____

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM GARSON, BRENT

4020 PAYNE AVENUE

CLEVELAND OH

MGRM GARSON, REID

4020 PAYNE AVENUE

CLEVELAND OH

MGRM GARSON, GREG

4020 PAYNE AVENUE

CLEVELAND OH

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****188.75 ****188.75

FL
3-25-99

SIGNATURE:

SIGNATURE AND TITLE OF SECRETARY OF STATE OR REGISTERED AGENT ACCEPTING APPOINTMENT

File

File in Block #