


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

APPROVED
AND
FILED

97 MAY -1 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L96000000993

R & D TECHNOLOGIES, L.C.
18139 S.W. 3RD STREET
PEMBROKE PINES FL 33029

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

1a. Principal Place of Business Address

18139 S.W. 3RD STREET
PEMBROKE PINES FL 33029

2. Principal Place of Business SAME	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

3. Date Organized or Qualified 09/20/1996	3a. State of Formation FL
4. FEI Number 65-0696143	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired <input type="checkbox"/> <small>SH 75 Additional Fee Required</small>

7. Name and Address of Current Registered Agent

DIAZ, HECTOR J
18139 S.W. 3RD STREET
PEMBROKE PINES FL 33029

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
~~400002173534--1~~

Suite, Apt. #, etc. ~~-05/09/97--01113--007~~
~~****203.75 ****203.75~~

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 *Hector Diaz* 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
MGRM	DIAZ, ELENA N	18139 S.W. 3RD STREET	PEMBROKE PINES FL
MGRM	DIAZ, HECTOR J	18139 S.W. 3RD STREET	PEMBROKE PINES FL
MGRM	ROSS, PHIL E	290 S.W. 9TH STREET 38780 Dodds LANDING	DANIA FL Willoughby, OH 44094
MGRM	ROSS, SUSAN G	290 S.W. 9TH STREET SAME AS ABOVE	DANIA FL
MGRM	GONZALEZ, WILKY J	19080 N.W. 86TH COURT	MIAMI FL
MGRM	GONZALEZ, SADIYE DERVA	19080 N.W. 86TH COURT No Longer Associated	MIAMI FL

A. Alan
5/1/97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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: *Hector Diaz* **Hector Diaz** Date 954/41-9892
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Daytime Phone #