	and		pt. 29, 199	99 or Limite	d Llab	ollity Com	pany		, 0		•	(
LIMITED LIABILITY COMPANY ANNUAL REPORT 1999  FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State DIVISION OF CORPORATIONS								FILED W1/23				
FILING \$ 588	. = = =	tual Report \$100.00 + \$88.7					Fee TE	4 JUL 12 '	• •			
1 Name	and Mailing Ad ted Liability Co	dress DOCII		. д		01046	1/	1a. Principal Pla				
BENNETT & GRUDA, L.L.C. 13899 BISCAYNE BOULEVARD SUITE 106 NORTH MIAMI BEACH FL 33181								13899 BISCAYNE BOULEVARD SUITE 106 NORTH MIAMI BEACH FL 33181				
2. Princip	al Place of Bu	2a. Mailing Address					3. Date Organize	ed or Qualified	3a. State of	Formation		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					10/01/1996 FL 4. FEI Number Applied			or -	
City & State			City & State			<del></del>		65-0680		]	Not Appl	
Zip	Country		Zip		Count	Country				e of Status De nal Fee Bequire		
	7. Name	and Address of Current	Registered	Agent		Name	8. 1	lame and Address		tered Agent/(	Office	
BENN 1389 SUIT NORT	Street Address (I Suite, Apt. *, etc City				P.O. Box Number is Not Acceptable)  c.  Zip Code							
its legiste:	red office or reg	sions of Sections 608.416 pistered agent, or both, in the accept the obligations.	and 608.508 State of Flor	, Florida Statute rida. Such chan	es, the a ge was a	bove-named uthorized by	limited affirmat	liability company si ive vote of a majorit	ubmits this state y of the member	ment for the p s. I hereby acc	ourpose of cha ept the appoin	inging itment
SIGNATURE							roinstating	<u>,                                     </u>	DATE	<u>.</u>		
10. Title	10. Title Managing Members/Managers			Business Street Address					City	, State and Zip	Code	
MGR	BENNETT, SCOT A P.A.			13899 BISCAYNE BO			воц	JLEVARD,	NORTH	IMAIM	BEACH	FL
MGR	GRUDA	, LESTER A F	P.A.	13899	BIS	CAYNE	воц	JLEVARD,	NORTH	MIAMI	BEACH	FL
								80	*****	29 <b>42</b> 27/990 188.75	SOB- 10330 ****18	1 010 18.75
indicated of limited liab	on this annual i	t the information supplied w report is true and accurate or or the receiver or trustee en ess.	and that my s	ignature shall h	rave the	same legal e	ffect as	if made under oath	; thal I am a ma	naging membe	er or manager	of the

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date: Date: Daylor Priorio V

INHSE10 R (6/99)

**SIGNATURE:** 



## BENNEIT & GRUDA, L.F.ILED CERTIFIED PUBLIC ACCOUNTANTS

99 JUL 19 PM 3: 46 SCOT A. BENNETT, CPA, P.A.

SECRETAL STATE Members, TALLAHASSEE TEORIBA Florida Institutor

Certified Public Accountants

July 14, 1999

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314-6327

Bennett & Gruda, L.C. FEI: 65-0680916

Gentlemen/Ladies:

We never received the first notice for filing this report. Based upon my telephone with the department of state at (850) 487-6051 the penalty would be waived upon request for abatement in writing.

Please abate the penalty for late filing due to non-delivery of initial notice and find enclosed a completed report with a check in the amount of \$188.75 for the 1999 annual report fee.

Thank you for your cooperation and attention to this matter.

Sincerly,

Scot A. Bennett, CPA