


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
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FILED

99 APR 14 AM 10:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 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 # L96000001236 GERARDO AND MERCEDES POLANCO FAMILY, L.C. 625 PUERTA AVENUE CORAL GABLES FL 33143

1a. Principal Place of Business Address 11050 MARIÑO ST 625 PUERTA AVENUE CORAL GABLES FL 33143 33156

2. Principal Place of Business 11050 MARIÑO STREET Suite, Apt. #, etc. City & State CORAL GABLES, FL Zip 33156	2a. Mailing Address 11050 MARIÑO STREET Suite, Apt. #, etc. City & State CORAL GABLES, FL Zip 33156	3. Date Organized or Qualified 11/25/1996	3a. State of Formation FL
		4. FEI Number 65-0712849	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report 03/20/1998	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent POLANCO 331430232 1199 21 03/11/99 NOTIFY SENDER OF NEW ADDRESS POLANCO 11050 MARIÑO ST MIAMI FL 33156-4226
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8. Name and Address of New Registered Agent/Office Name GERARDO POLANCO Street Address (P.O. Box Number is Not Acceptable) 11050 MARIÑO STREET Suite, Apt. #, etc. City CORAL GABLES, FL Zip Code 33156
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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: Gerardo Polanco DATE: 3-17-99
(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	POLANCO, GERARDO A	11050 MARIÑO ST 625 PUERTA AVENUE	CORAL GABLES FL
MEM	POLANCO, MERCEDES	11050 MARIÑO ST 625 PUERTA AVENUE	CORAL GABLES FL
MEM	POLANCO, CARLA P	11050 MARIÑO ST 625 PUERTA AVENUE	CORAL GABLES FL
MEM	POLANCO, RICARDO J	11050 MARIÑO ST 625 PUERTA AVENUE	CORAL GABLES FL

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 4-19-99

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: Gerardo Polanco DATE: 3-17-99 305 279-3878
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #