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

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	ED LIABILITY COMPANY ANNUAL REPORT 1997		Sandr Secr	B. Mo			FILED	* • •		
FILING FEE Annual Report \$100.00 + \$103.76 Corporation Supplemental Fee						97 APR -7 PH 1: 29				
\$ 203			TARREST VICTOR CO.			CEPRE	TARY OF	STATE	ļ	
1. Name and Malling Address of Limited Liability Company DOCUMENT #1_96000001244						TALLA	TARY OF HASSEE, I	FLORIUA		
FRESMAR INTERNATIONAL, L.C.						18. Principal Pi	ace of pusines:	s Address	ı	
14732 S.W. 55TH TERRACE MIAMI FL 33185							14732 S.W. 55TH TERRACE			
							78 AVE	NUE	1	
	mailing address is incorrect in any way, line to			enter con	rection in Block 2a.	MIANI			1	
, , , , , , , , , , , , , , , , , , , ,			alling Addres	•			ed or Qualified		ion	
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Miami, FL City & State			Miomi PL City & State			Applied For				
,	-1.0					5. Date of Last	Renort	6. Certificate of Stat	t Applicable	
Zip 331	26 Country USA.	33	126	Count	ÅŠ.	V. Dailo D. Lausi		AND STREET, No. of STREET, No. of Street,		
	7. Name and Address of Curre	nt Registere	d Agent		Name	8. Name and Add	iress of New F	Registered Agent		
LIMOOW.	D THOMASVILLE ROA! VERNON SQUARE MAGSEE FL 32303		Street Address (P.O. Box Number Is Not a Sulte, Apt. #, etc.				Zip Code			
							FL	<u> </u>		
its registe	uant to the provisions of Sections 608.41 ered office or registered agent, or both, in ered agent, and accept the obligations.					ative vote of a major		ers. I hereby accept the a		
(Registered Agent Accepting Appointment) (N			(NOTE Registered Ag	OTE Registered Agent argnature required when reinstalling)			1			
10. Little	10. Title Managing Members/Managers			Business Street Address			- Cr	ty, State and Zip Code		
MGR						, Miomi) DOQ -04/0	2135975 8/97-01035- 212.50 ****	5——2 -006 212.50	
								M		
indicated limited lia attachme	ereby certify that the information supplied on this annual report is true and accurate bility company or the receiver or trueled ont with an address.	e and that my empowered t	y signature shall i to execute this re	have the port as re	same legal effect a equired by Chapter	as if made under oat 1608, Fiorida Statute <i>Had</i>	h; that I am a m	nanaging member or ma name appears in Block	nager of the	
, - / - •			D NAME OF SIGNING	MANAGING	MEMBER OR MANAGER	₹	Date	Daytime Phon	e *	