


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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>FILING FEE</b>	<b>Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee</b>
<b>\$ 203.75</b>	<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>

1. Name and Mailing Address of Limited Liability Company  
**DOCUMENT # L96000001256**

**CLAUDICA, L.C.**  
806 SOUTH DIXIE HIGHWAY  
HOLLYWOOD FL 33020

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

806 SOUTH DIXIE HIGHWAY  
HOLLYWOOD FL 33020

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

3. Date Organized or Qualified	3a. State of Formation
11/25/1996	FL
4. FEI Number	
65-0714131	
5. Date of Last Report	6. Certificate of Status Desired
	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
	<input type="checkbox"/> Subchapter S Optional Fee Required

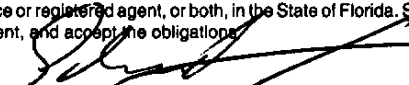
7. Name and Address of Current Registered Agent

SUGAR, EDMOND L ESQ.  
950 SOUTH FEDERAL HIGHWAY  
HOLLYWOOD FL ~~33020~~

8. Name and Address of New Registered Agent

Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
Suite, Apt. #, etc. \_\_\_\_\_  
City \_\_\_\_\_  
Zip Code **FL 33020**

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 **Feb 5, 97**

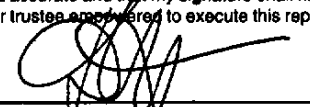
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	DELHUSZA, CLAUDETTE	3175 NO 36TH AVE.	HOLLYWOOD FL
MGRM	HASMASAN, ZOIA	3175 NO 36TH AVE.	HOLLYWOOD FL
MGRM	RUSSO, MONICA	3175 NO 36TH AVE.	HOLLYWOOD FL

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\*\*\*\*203.75 \*\*\*\*203.75

J62-11-97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_