


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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAY -3 AM 11:32	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b>			
		<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000001317		1a. Principal Place of Business Address	
SOUTHERN FINANCIAL MANAGEMENT, L.C. 1001 BRICKELL BAY DRIVE SUITE 2206 MIAMI FL 33131		99-AR em		1001 BRICKELL BAY DRIVE SUITE 2206 MIAMI FL 33131	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
MIAMI		600 Brickell Ave suite 206F		12/18/1996	
Suite, Apt. #, etc. 206 F		Suite, Apt. #, etc. 206 F		3a. State of Formation FL	
City & State MIAMI FLORIDA		City & State MIAMI FLA		4. FEI Number 65-0113626	
Zip 33131		Zip 33131		5. Date of Last Report 09/02/1998	
Country USA		Country USA		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent/Office		
VALENTIN, CARLOS M ESQ. 1001 BRICKELL BAY DRIVE SUITE 2206 MIAMI FL 33131			Name Street Address (P.O. Box Number is Not Acceptable) 500002871845 Suite, Apt. #, etc. -05/11/99--01081--012 ****188.75 ****188.75 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. Thereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____			DATE _____		
10. Title      Managing Members/Managers      Business Street Address      City, State and Zip Code					
MGRM	SEGRERA, ANA MARIA	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
MGRM	BELTRAN, AUGUSTO JR.	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
MGRM	BELTRAN, AUGUSTO SR.	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
MGRM	LECOMPTE, GUSTAVO	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
MGRM	BELTRAN, ANA MARIA	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
MGRM	MONROY, ARMANDO	1001 BRICKELL BAY DRIVE,	\$	MIAMI FL	
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: _____			07-27-99 3053745908		