

2nd and FINAL NOTICE: File on or before Sept. 29, 1999 or Limited Liability Company will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	--

FILED

99 NOV -5 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$ 588.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company
DOCUMENT # L9700000366

LASTANA LIMITED COMPANY
 251 CRANDON BLVD., #724
 KEY BISCAVNE FL 33149

1a. Principal Place of Business Address

251 CRANDON BLVD., #724
 KEY BISCAVNE FL 33149

REINSTATEMENT 99

2 Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03/28/1997	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	5. Date of Last Report	6. Certificate of Status Desired
				10/02/1998	<input type="checkbox"/>

7. Name and Address of Current Registered Agent

ITZA, SEVERO ANGEL
 251 CRANDON BLVD #724
 KEY BISCAVNE FL 33149

8. Name and Address of New Registered Agent/Office

Name: **SEVERO ITZA**
 Street Address (P.O. Box Number is Not Acceptable):
251 CRANDON BLVD # 724
 Suite, Apt. #, etc.:
KEY BISCAVNE, FLORIDA
 City: **FL** Zip Code: **33149**

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 9-28-99
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	ITZA, SEVERO A	251 CRANDON BLVD #724	KEY BISCAVNE FL

500003047315--6
 -11/17/99--01061--016
 ****588.75 ****588.75

9-9-99

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 prepare 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 9-28-99 By _____ Phone # _____