LIMITED LIABILITY COMPANY ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR 20 PM 12: 22		
FILING FEE A \$ 188.75	Annual Report \$100. Make Check Payabl				00	MIN 20 1	1712:22 Hz 4/21
Name and Mailing of Limited Liability			# L9700		7		
% REA 1110	PALMS, L.C. AL ESTATE COI BRICKELL AVI I FL 33131				% REAL 1110 B		CONCEPTS INC. AVE. SUITE 51
2. Principal Place of	Business	2a. Mail	2a. Mailing Address			zed or Qualified	3a. State of Formation
Sulte, Apt. #, etc.	, , , , , , , , , , , , , , , , , , , 	Suite, Ap	it. #, etc.		04/01/ 4. FEI Number	1997	FL
Oity & State		City & State				2105450	
Z ip	Country	Zip		Country	5. Date of Last	Report	6. Certificate of Status Desire 58 75 Additional Fee Required
7. N	lame and Address of Curr	ent Registered	Agent	Name	8. Name and Addre	ss of New Regis	stered Agent/Office
	. 74TH STREE!	T		Street Address	s (P.O. Box Number	is Not Acceptal	ble)
#400 SIUTH MIA	AMI FL 33143		, Florida Statutes,	Sulfe, Apt. #, 6	etc.	FL	Zip Code
#400 SIUTH MIA 9. Pursuant to the p its registered office o	AMI FL 33143	16 and 608.508 n the State of Flo		Suite, Apt. #, 6 City the above-named limit	etc.	FL submits this state	Zip Code
#400 SIUTH MIA 9. Pursuant to the p Its registered office of	AMI FL 33143 provisions of Sections 608.4 or registered agent, or both, in and accept the obligations.	16 and 608.508 n the State of Flo	rida. Such change	Suite, Apt. #, 6 City the above-named limit	etc. ted liability company mative vote of a major	FL submits this state	Zip Code
#400 SIUTH MIA 9. Pursuant to the p Its registered office o as registered agent. SIGNATURE	AMI FL 33143 provisions of Sections 608.4 or registered agent, or both, in and accept the obligations.	16 and 608.508 n the State of Flo	rida. Such change	Suite, Apt. #, e City the above-named limit was authorized by affire	etc. ted liability company mative vote of a major	FL submits this state rity of the member	Zip Code
9. Pursuant to the p Its registered office of as registered agent. SIGNATURE MEM BARR	AMI FL 33143 provisions of Sections 608.4 or registered agent, or both, ir and accept the obligations. (Registered Agent Accept Managing Members/Mana	16 and 608.508 n the State of Flo	NOTE Registered Agent	Suite, Apt. #, 6 City the above-named limit was authorized by affirm signature required when reinstances. SICKELL AVI	ted liability company mative vote of a major eting) ss E SUITE \$12	submits this state rity of the member DATE City	Zip Code ement for the purpose of changirs. I hereby accept the appointme , State and Zip Code FL , 33131
9. Pursuant to the p its registered office of as registered agent. SIGNATURE MEM BARR MEM JARA	AMI FL 33143 provisions of Sections 608.4 or registered agent, or both, in and accept the obligations. (Registered Agent Accept Managing Members/Mana	16 and 608.508 in the State of Flooring Appointment) (forgers	NOTE Registered Agent E 1110 BF	Suite, Apt. #, e City the above-named limit was authorized by affire signature required when reinest Business Street Address	ted liability company mative vote of a major sering) ESUITE 5.2 ESUITE 5.4 ESUITE 5.4	submits this state rity of the member DATE City MIAMI MIAMI	Zip Code ement for the purpose of changir s. I hereby accept the appointme

Carfela Carfela

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

SIGNATURE: _