File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY

ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

Name and Malling Address of Limited Liability Company

**DOCUMENT #** L 97 000000422

DIANA INVESTMENT, LLC 30 LaGorce Circle Miami Beach, FL 33141

FILED 98 APR 10 AM 8: 56

1a. Principal Place of Business Address

30 LaGorce Circle Miami Beach, FL 33141

2. Principal Place of Business			2a. Mailing Address			3. Date Organized or 0	Qualified	3a. State of Formation	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			4/15/1997 4. FEI Number		FL Applied For	
City & State C			City & State	City & State		65-0823871 Not Applicable			
Zip Country			Zip Count		lry	5. Date of Last Report		6. Certificate of Status Desired	
						N/A		S8.75 Additional Fee Required	
	7. Name	and Address of Current	Hegistered Agent		Name and Address of New Registered Agent/Office     Name				
Diana Sanchez 30 LaGorce Circle Miami Beach, FL 33141					Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.				
					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 lts 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									
10. Title Managing Members/Managers			· · · · · · · · · · · · · · · · · · ·	Business Street Address			City, State and Zip Code		
MGRM	Dian	a Sanchez	30	LaGo	orce Circ		331		
į								4880045 /9801053013 98.75 ****188.75	
11. Ido 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									

indicate\*On this annual report is true and accurate and thet 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 AND TYPEH OF PHINTED NAME OF SISNING MANAGE

SIGNATURE: