


File on or before May 1, 1998. Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE <b>Sandra G. Motham</b> Secretary of State DIVISION OF CORPORATIONS		FILED 98 MAR 18 PM 3: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L97000000456		1a. Principal Place of Business Address	
LA PIAZZA AT YOUNG CIRCLE, L.C. 3990 SHERIDAN STREET SUITE 209 HOLLYWOOD FL 33021				3990 SHERIDAN STREET SUITE 209 HOLLYWOOD FL 33021	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/28/1997	
City & State		City & State		4. FEI Number	
Zip		Zip		65-0762448	
Country		Country		5. Date of Last Report	
				6. Certificate of Status Desired	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable \$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		
BERMAN, STEVEN B 3990 SHERIDAN STREET SUITE 209 HOLLYWOOD FL 33021			Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City		
			700002462857--3 -03/20/98--01009--019 ****188.75 ****188.75 FL		
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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE _____					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MEM	BERMAN, HOWARD B	3990 SHERIDAN STREET #209		HOLLYWOOD FL	
MEM	BERMAN, SUSY	3990 SHERIDAN STREET #209		HOLLYWOOD FL	
MEM	BERMAN, STEVEN B	3990 SHERIDAN STREET #209		HOLLYWOOD FL	
MEM	BATIEVSKY, ABRAHAM	3990 SHERIDAN STREET #209		HOLLYWOOD FL	
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11. I 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:

STEVEN BERMAN

2/28/98

(407) 981-7744

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

Date

Daytime Phone #