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

LIMITED LIABILITY COMPANY ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

98 MAY -5 PM 1: 17

SECRETARY OF STATE

1998 Secretary of State Division of Corporations								TALLAHASSEE: FLORIDA			
. \$ <u>188</u> .	75 Ma	ke Check Pa	100.00 + \$88.75 yable To: FLOR	DA DEPAR	TMEN	T OF STATE	<b>†</b>				
of Limit	and Mailing Ad led Liability Co	mpany DO	OCUMENT	# L970	000	00883					
1	R.A.C.	109J L.	c.				1a. Principal Place of Business Address				
		BISCAYNE PL 33161	BLVD - P	Н			10800 BISCAYNE BLVD - PH MIAMI FL 33161				
2. Principal Place of Business 2a. Maili				ng Address			3. Date Organ	ized or Qualified	3a. State o	3a. State of Formation	
Sulle, Apt. #, etc. Suite, Ap				t. #. etc.			08/11/1997		FL /		
3500,14							4. FEI Numbe	r		Applied For	
City & State City & Sta				xte			Not Applicable				
Zip	· <b></b>	Country	Zip		Counti	у	5. Date of Las	Report		te of Status Desired	
·					<u> </u>		<u> </u>			лыl Fee Required	
7. Name and Address of Current Registered				Agent	<del></del>	Name	8. Name and Address of New Registered Agent/Office				
10800 MIAM	I FL 33	YNE BLV				****] City FL			516: 73801 387.50 Zip Code	127006 ****188.75	
its register	ed office or regi		608.416 and 608.508 oth, in the State of Flo tions.								
SIGNATU	RE	(Registered Apen	Accouting Appointment (f)	IOTE Registered Agent signature required when reinstaling			DATE				
10. Title				Business Street Address				City, State and Zip Code			
ſ	KOO KO	INC. QUISITI,	11075 SANTA MONICA BLVD, 10800 BISCAYNE BLVD - PH				S LOS ANGELES CA MIAMI FL				
MCRM	HARRIS, MEL			10800 BISCAYNE BLVD			שם – חזי	MIAMI	<b>ਦਿ</b> ਤ	i	
Monda		,, FIBE		10800	<b>D</b> 150	CAINE BLY	VV - FR				
		<u> </u>						de	40/6	198	

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 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.