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	D LIABILITY COMF ANNUAL REPORT	ANY	Sandra B.	Mortham	- l	SECRETAL DIVISION OF	ILED RY OF STATE CORPORATIONS
•	1998		Secretary DIVISION OF CO			OR MAY -	6 AM 10: 57
FILING \$ 188	FEE Annual Report	rt \$100.00 + \$88.7 Payable To: FLO	5 Corporation Su RIDA DEPARTME	pplemental F	ee	JOTINI	O MITIO O 7
Name of Limi	and Mailing Address ted Llabitity Company	DOCUMEN	T # L97000	001079			
,	ancerta report				1a. Principal Pla	ace of Business A	Address
	ENGELMAIER A: 7 JASMINE RUI		7 JASMI	7 JASMINE RUN			
	ORMAND BEACH					BEACH F	L 32174
2. Princip	al Place of Business	2a. Ma	illing Address	·	3. Date Organiz	ed or Qualified	3a. State of Formation
8 6		Out	Ant # oto		09/29/1	09/29/1997 FL	
Sulte, Apt	, #, e tc.	Suite,	uite, Apt. #, etc.		4. FEI Number		
City & Sta	le	City &	State		59-3477	446	Not Applicable
Ziρ	Country	Zip	I Co	untry	5. Date of Last I	Report	6. Certificate of Status Desired
							\$8.75 Additional Fee Required
	- 11						
	7. Name and Addres	s of Current Registere	d Agent		8. Name and Addres	s of New Regist	tered Agent/Office
RAYMO			d Agent	Name	8. Name and Addres	s of New Regist	lered Agent/Office
BUTZI	OND, JOHN J	JR.		Name	8. Name and Addres		
BUTZI 1200	OND, JOHN J OEL LONG N. FEDERAL	JR. HIGHWAY, St		Name Street Addres	ss (P.O. Box Number I		
BUTZI 1200	OND, JOHN J EL LONG N. FEDERAL 1 RATON FL 33	JR. HIGHWAY, SU		Name	ss (P.O. Box Number I		
BUTZI 1200	OND, JOHN J OEL LONG N. FEDERAL	JR. HIGHWAY, SU		Street Address	ss (P.O. Box Number I	Is Not Acceptab	
BUTZI 1200 BOCA	OND, JOHN J EL LONG N. FEDERAL RATON FL 33	JR. HIGHWAY, SU 432	JITE 411	Street Address Suite, Apt. #,	ss (P.O. Box Number I	s Not Acceptab	le)
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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.