LIMITED LIABILITY COMPANY ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 APR 22 PH 2: 13				
\$ 188. 1 Name a	FEE Annual Report \$100.00 75 Make Check Payable and Mailing Address DOCL ed Liability Company DOCL	To: FLOR	IDA DEPAR	TMENT	ilemental Fee FOF STATE 01155					
EUDSON INDUSTRIAL, L.L.C. 1221 BRICKELL AVE SUITE 900 MIAMI FL 33131						18. Principal Place of Business Address 1221 BRICKELL AVE SUITE 900 MIAMI FL 33131				
2 Principal Place of Business			2a. Mailing Address				3. Date Organized or Qualified 3a. State of Formation 10/16/1997 FL			
Suite, Apt	#, etc.	Suite, Apt. #, etc.			4. FEI Number Applied For					
City & State		City & State				65-0788614 5. Date of Last Report 6. Certificate of Status Des		Not Applicabl		
Ζip	Country	Ζip		Courtr	У	03/02/1	.998	\$8.75 Add	litional Fee Required	
	7. Name and Address of Curren			8. Name	Name and Address	s of New Regi	istered Age	nt/Office		
, Pursual	nt to the provisions of Sections 608.416 ed office or registered agent, or both, in th	and 608.50	8, Florida Statut	es, the ab	City	Hability company si	FL	Zip Code	1 SK	
	red agent, and accept the obligations		orida Such char	ige was ai —	unorized by amma				1999	
0. Title	excentered Actor Manager Managing Members/Manage		<u>er Arning Soura</u> T		ss Street Address	·	· · · · ·	y, State and		
мем	FRANKE, CHRISTIA	345 OCEAN DR STE 830 1221 BRICKELL AVE ST				мілні Міаң	- BEAG I FL			
Į						10	[¥ []]), []] (14/ ***	285 29799- *188.7	7271 -0112001 5 ****188.	
ndicated o	reby certify that the information supplied w in this annual report is true and accurate filty company or the receiver or trustee e	and that my	signature shall t	have the s	same legal effect as	s (fimade under oath	, that I am a m	anaging mer	nber or manager of th	

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