	or before May 1, 1998 or t to a \$ 400.00 LATE FEE.		Liability Com	pany will be	•		
LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS					SECRETARY OF STATE DIVISION OF CORPORATIONS		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee					98 MAR -2 AM 10: 57		
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Malling Address DOCLIMENT #					l 45 /5 /		
of Limited Liability Company DOCUMENT # L97000001278							
L & A APARTMENTS, LLC 784 APPLEBY STREET BOCA RATON FL 33487					1a. Principal Place of Business Address 784 APPLEBY STREET BOCA RATON FL 33487		
2. Princip	pal Place of Business	2a. Mailir	ng Address		3. Date Organiz	ed or Qualified	3a. State of Formation
Sulte, Apt. #, etc. Suite, Apt			t. W, etc. CAME		11/13/1997 FL 4. FEI Number		
	<u> </u>		(PW	· • · · · · · · · · · · · · · · · · · ·			Applied For
City & Sys	"calaton FL	City & Sta	ate S		65-079	<u> </u>	Not Applicable
Zip	VG7 Country/ P. /	Z ip	Counti	У	5. Date of Last f	teport	6. Certificate of Status Desired State Additional Fee Regulated
00	7. Name and Address of Current	Registered :	Agent	8	Name and Addres	s of New Renie	
Name / OO							
ROSENTHAL, STUART A ESQ 404 EAST ATLANTIC BOULEVARD, SUITE 1 Street Address (P.O. Box Number la Not Acceptable)							
POMPANO BEACH FL 33060 Suite, Apt. #, etc.							
N/A							
Boca Raton FL 3348							Zip Code 33487
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 Accopting Appointment) (NOTE, Registered Agent signature required when teinstating) DATE 2-26-95							6-95
10. Title			Business Street Address		0	City, State and Zip Code	
MGR	O'BRIEN, ANDREW		784 APPLEBY STREET		BOCA RATON FL		
					500	- 03/10/	1520756 3881042004 8.75 ****188.75
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11. I do hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Fiorida 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.							
SIGN	IATURE: SIGNATURE AND TYPE	OR PRINTED N	AME OF SIGNING MANAGING N	J & J (S) (WY) MEMBER OR MANAGER	Managi	S Momb	2/26/93 Daytime Phone #