File on or before May 1, 1998 or I subject to a \$ 400.00 LATE FEE.	Limited Liability Com	npany will be		والاستخفاض والمعيد الها	ngan an n	
LIMITED LIABILITY COMPANY ANNUAL REPORT 1998 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		l ortham f State	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR - 2 AM 9: 24			
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			98 RPR - 2 RIT 3- 12-1			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L97000001321 GROBRO INVESTMENTS, L.L.C. 2875 NE 191ST STREET PH 3A AVENTURA FL 33180			1a. Principal Place of Business Address 2875 NE 191ST STREET PH 3A AVENTURA FL 33180			
Principal Place of Business 2a. Mailing Address		. <u> </u>	3. Date Organized or Qualified 3a. State of Formation			
2937 SW27th Ave	Suite, Apt. #, etc.		11/24/19	997	FL	
Suche 100C	City & State		4. FEI Number		Applied For Not Applicable	
Zip County Grave, Ab	Zip Count	try	5. Date of Last Re	port	6. Certificate of Status Desired	
7. Name and Address of Current F	Registered Agent	B. N	ame and Address	of New Registe	ered Agent/Office	
GROSMAN, SEAN 2875 NE 191ST STREET PI AVENTURA FL 33180	н За	Street Address (P				
		City			Zip Code	
Pursuant to the provisions of Sections 808.416 at its registered office or registered agent, or both, in the as registered agent, and accept the obligations. SIGNATURE SIGNATURE	State of Florida. Such change was a	authorized by affirmati	e vote of a majority of	omits this statem of the members.	I hereby accept the appointment	
(Registered Agent Agcepting Appointment) (NOTE: Registered Agent signature required when re 10. Title Managing Members/Managers Business Street Add			a(rig)			
MGR SMG VENTURES, INC	91ST STRE	ЕТ РН ЗА				
			700	0002 -04/07/ ****18	481697C /9801087010 38.75 ****188.75	

11. I do hereby certify that the information supplied with this filling 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 eath; 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.

、 A. C. Tending of Application and Applications and App

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

03/24/98 305-4467796