


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  99 MAY -4 PM 4: 17	
<b>FILING FEE</b> \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1 Name and Mailing Address of Limited Liability Company  <b>DOCUMENT #</b> L98000000137 MIRACLE INVESTMENTS, L.L.C. 1621 S.W. 15TH STREET MIAMI FL 33145		1a. Principal Place of Business Address 1621 S.W. 15TH STREET MIAMI FL 33145			
2 Principal Place of Business 12201 SW 45 ST. Suite, Apt. #, etc. City & State MIAMI FL Zip 33175		2a. Mailing Address 12201 SW 45 ST. Suite, Apt. #, etc. City & State MIAMI FL Zip 33175		3. Date Organized or Qualified 02/02/1998 3a. State of Formation FL 4. FEI Number 65-0813460 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent MIAMI CORPORATE SYSTEMS, INC. 5200 BLUE LAGOON DRIVE, SUITE 700 MIAMI FL 33126			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code 33145		
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 _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-stating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	NAVA, VALERIO R	1621 S.W. 15TH STREET		MIAMI FL	
MGRM	POVAR, JOSE G	1621 S.W. 15TH STREET		MIAMI FL	
MGRM	NAVA SORAYA R	See 2 above.			
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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), 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 <b>SIGNATURE:</b> <u>Valerio Raval Nava by etc</u> <u>4/20/99</u> <u>305 225-2270</u>					