MITED LIABILITY COMPANY ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	99 MAY 211 PM 1: 29	
LING FEE Annual Report \$100.00 + \$8 \$ 188.75 Make Check Payable To: F	8.75 Corporation Supplemental Fe LORIDA DEPARTMENT OF STATE	American Services	
	NT # L9800000589	TALL AHABBE FEGRIDA	
		1a. Principal Place of Business Address	
ALDENTE TRATTORIA L.1 STORE G, 2500 EAST HE HALLANDALE FL 33309		. STORE G, 2500 EAST HALLAN HALLANDALE FL 33309	ADI
Principal Place of Business 2a.	Mailing Address	Date Organized or Qualified 3a. State of Formation	
2500[Hallmonle Beach.	SAME	05/08/1998 FL	
uite, Apt. #, etc. Sui	ite, Apt #, etc.	4 FEt Number	
SLUD. STORE G. City 8 State	y & State	Applied Not Applied	
Hallmanle, Fl.	•	5. Date of Last Report 6. Certificate of Status E	
Sountry Zip	Country	\$8.75 Additional Fee Requi	
7. Name and Address of Current Regis	stered Agent 8	Name and Address of New Registered Agent/Office	
PINKWASSER, ALAN 3231 MUIRHEAD CIRCLE 30YNTON BEACH FL 33437	Streel Address / / (/ Suite, Apt. #, 6	s (P.O. Box Number is Not Acceptable) (C. Chry Licente Of etc.	
•	City	118 Beach FL 32	
a registered office or registered agent, or both, in the State is registered agent, and accept the obligations.	8.508, Florida Statules, the above-named limit of Florida. Such change was authorized by affin	ted liability company submits this statement for the purpose of chemative vote of a majority of the members. I hereby accept the appo	nangin intmer
). Title Managing Members/Managers	Business Street Address	<u>- </u>	
. Title waring members/managers	Dusiness Offert Address	ony, orace and 2-p code	
IGRM PULEO, RAFFAELE	1717 N. BAYSHORE	DRIVE MIAMI FL	
IGRM PECAWHA, MARCO A	6538 COLLINS AVE	NUE, #412 MIAMI BEACH FL	
		400002887694 -05/26/9901102 ****188.75 *****1	000
		400002887694- -05/26/9901102(******8.75 ******	700
•		কককককক; (১ ককককক	Piči.
			rmatic