


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	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L 9800000000			
CARDEL-MIBP HOTEL, L.C. 2300 Coral Way, Suite 111 Miami, Florida 33145		1a. Principal Place of Business Address  2300 Coral Way, Suite 111 Miami, Florida 33145			
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5/28/1998	
City & State		City & State		4. FEI Number	
Zip		Zip		65-0840108	
Country		Country		5. Date of Last Report	
				N/A	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
Dade Corporate Services, Inc. 2300 Coral Way, Suite 103 Miami, Florida 33145		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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 <i>Vivian Williams</i> VIVIAN WILLIAMS Pres of Dade Corp. Serv. DATE 4/29/99 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title	Managing Members/Managers		Business Street Address		City, State and Zip Code
MGRM	Pan American Dev., Inc.		2300 Coral Way, Suite 111		Miami, FL 33145
MGRM	Carwood, L.C.		6700 S.W. 132nd Street		Miami, Florida
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.					
SIGNATURE: <i>Carlos J. Rodriguez</i> CARLOS J. Rodriguez 4/20/99 305-500-9000 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Display Phone #					