Α	D LIABILITY COMPANY ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			SECRETARY OF STATE DIVISION OF CURPORATIONS 99 AFR -7 PM 2: 22				
ILING \$ 188.		To: FLOR	IDA DEPAR	RTMEN	T OF STATE]			
Name a	and Mailing Address ted Liability Company	UMEN	F# L980	0000	01943	1			
. 5	SUSSMAN & SUSSMAN 5841 BISCAYNE BOU MIAMI FL 33137			GEME)	NT, LLC	5841 B	SCAYNE 3313	BOULEVARD	
Principa	al Place of Business	ing Address			3. Date Organized or Qualified 3a. State of Formation 9/22/1998 FL				
Suite, Apt #, etc. Suite			, Apt. #, elc.			4. FEI Number		FL	
City & State			City & State			65-0902551		Applied For Not Applicable	
Country		Zip	Z(p C		5. Date of Las		Report	Certificate of Status Desired S8.75 Additional Fee Required	
_	7. Name and Address of Curre	nt Registered	Agent		B. Name	Name and Addres	s of New Regis	tered Agent/Office	
Pursual registere	I FL 33137 Int to the provisions of Sections 608.41 ed office or registered agent, or both, intered agent, and accept the obligations.					liability company s			
GNATUF	RE						DATE :		
p. Title Managing Members/Managers			DIE Begiseer Agents geating region Ewher near Efficial Business Street Address			11	City, State and Zip Code		
1GRM	SUSSMAN, MAURICE	5841 BISCAYNE BOULE			LEVARD	MIAMI	FL		
IGRM	RM SUSSMAN, IRVING			5841 BISCAYNE BOULEVAR			IMAIM	FL	
IGRM	GRM SUSSMAN, SELIG			5841 BISCAYNE BOULE			MIAMI	FL	
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