


2<sup>nd</sup> and File on or before Sept. 29, 1999 or Limited Liability Company  
FINAL NOTICE: will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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<b>FILING FEE</b> \$ 588.75	Annual Report \$100.00 + \$68.75 Corporation Supplemental Fee + \$400.00 Late Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company  <b>7510 INVESTMENTS, L.C. 12224 SW 101 TERRACE MIAMI FL 33186</b>	<b>DOCUMENT # L98000001971</b>
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2. Principal Place of Business <b>12224 S.W. 101 Terr.</b> Suite, Apt. #, etc.  City & State <b>MIAMI FL</b> Zip <b>33186</b> Country <b>USA</b>	2a. Mailing Address <b>Same</b> Suite, Apt. #, etc.  City & State  Zip Country
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588.75  
**FILED**  
99 OCT -8 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address  <b>12224 SW 101 TERRACE MIAMI FL 33186</b>	3. Date Organized or Qualified <b>09/24/1998</b>	3a. State of Formation <b>FL</b>
4. FEI Number <b>65-0865662</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report <b>First</b>	6. Certificate of Status Desired <input type="checkbox"/>	

7. Name and Address of Current Registered Agent  <b>PEREZ, MARTINIANO 12224 SW 101 TERRACE MIAMI FL 33186</b>	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City <b>FL</b> Zip Code
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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 *[Signature]* DATE Sept. 29, 1999  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	PEREZ, MARTINIANO	12224 SW 101 TERRACE	MIAMI FL
MGR	SALADRIGAS, CARLOS A J	11000 SW 83RD AVE.	MIAMI FL

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*[Signature]* 9/29/99

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:** *[Signature]*

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

Date

Daytime Phone #