


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 Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002406 G & G FEINKOST, L.C. 841 COLLINS AVENUE, SUITE 100 MIAMI FL 33139		1a. Principal Place of Business Address 841 COLLINS AVENUE, SUITE 100 MIAMI FL 33139	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	2a. Mailing Address Suite, Apt. #, etc. City & State Zip	3. Date Organized or Qualified 4. FEI Number	3a. State of Formation <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. Certificate of Status Desired \$875 Additional Fee Required <input checked="" type="checkbox"/>
5580 NE 4th CT D Miami FL 33137	5580 NE 4th CT D Miami FL 33137	10/13/1998 65-0848533	FL N/A
7. Name and Address of Current Registered Agent GABRIEL, ERIC 8301 N.E. 10TH AVENUE MIAMI FL 33138 1100 WEST AVE #4 MB, FL 33139		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code 1100 WEST AVE #4 #4 MB FL 33139	
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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE _____ DATE 2.25.99			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GABRIEL, ERIC	8301 N.E. 10TH AVENUE 841 COLLINS AVE	MIAMI FL 33139 500002805365-2 -03/15/99 -01102-002 ****197.50 ****197.50 AL MAR 11 1999
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: _____ 2.28.99 673167			