2 <sup>nd</sup> 6	and File on or before		9 or Limite	d Llabi	liity Compar	ny		(	
LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State Division of Corporations							SPORT CHALL SPORT CHAPTER STATE EIVISION OF CHAPTER ATTOMS  99 SEP 13 PM 1: 45		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE									
1 Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002419  HATTLER'S PLANTATION, LLC 11180 SNAPPER CREEK ROAD CORAL GABLES FL 33156							1a. Principal Place of Business Address  11180 SNAPPER CREEK ROAD CORAL GABLES FL 33156		
2 Principa	al Piace of Business	2a. Mailin	g Address	-	<u></u>	3. Date Org	ganized or Qualified	3a. State of Formation	
Suite, Apt	#. elc	Suite, Apt	#, etc.			10/26 4. FEI Num	5/1998 hber	FL Applied For	
City & State		City & Sta	te	- <del></del> -		45	5-0873	3277 Not Applicab	
Z (-	Country	Z <sub>I</sub> p		Countr	у	5. Date of L	ast Report	6. Certificate of Status Desire \$8.75 Additional Fee Required	
	7. Name and Address of Cu	rrent Registered	Agent	<u> </u>		). Name and Ad	dress of New Regi	stered Agent/Office	
its register	int to the provisions of Sections 600 red office or registered agent, or both red agent, and accept the obligation	i, in the State of Flor	Florida Statute ida. Such chan	s, the at ge was a	Suite, Apt. #, e City  Dove-named limi uthorized by affir	ted liability compa	FL any submits this stat najority of the membe	Zip Code lement for the purpose of changings. I hereby accept the appointment	
SIGNATU	FHF Chan School South As	ephorphope of soft (fa	OT: Registereri Au	ent signature	e required when remai	atrig)	DATE		
10. Title	Managing Members/Managers			Business Street Address			Cit	City, State and Zip Code	
MGR	CHESTERFIELD C	APITAL,	11180	SNA	PPER CR	eek roai	CORAL	GABLES FL	
			II			-	400002 -09/2 ****	2993804 22/9901063003 :188.75 ****188.	
}							l I	AL)	
nu lateo d Insternial:	reby certify that the information support this annual report is true and according to company or the receiver or true it with an address	urate and that mys	ignature shall h	ave the:	same legal effec	t as if made unde	er oath; that I am a m	anaging member or manager of t	

Grand HI AND LOCAL CONTROLLANDAGENCE MENT OF THERE MAY MAKE THE DAY TO THE TOTAL AND THE PROPERTY OF THE PROPE

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SIGNATURE:

Florida Department of State
Division of Conferencions
P.O. Box 6327
Tallahasses, Florida 323,4
September 7, 1999

Gintlemen:

I spok today with one of your representatives and told him that I had not received a natice for payment for fattlies Plantation, LLC prior to the melosed. He told me to write a letter stating some and send it in along with a check for \$188.75 which is enclosed.

Please let m know of you require any further information.

John truly,

The atten

Richard MATTLER, MANAGING MEMBER HATTER'S PRONTATION, LIC

11180 SNAPPEN CYCLE ROAD

COVAL GADIES, Florida 33156