ED LIABILITY COMF ANNUAL REPORT 1999	LORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS 99 APR -2 PM 1:43			
	ort \$100.00 + \$88.75 C k Payable To: FLORID					
e and Mailing Address nited Liability Company	DOCUMENT	# L98000	002825			
US EVENTS, 20515 EAST C AVENTURA FL	COUNTRY CLUB	DRIVE, S	UITE 445	1a. Principal Place of B 20515 EAST AVENTURA I	r COUNTRY	Y CLUB DRIV
2 Principal Place of Business 2a. Mail		ing Address		3. Date Organized or 0	Qualified 3a. St	ate of Formation
Suite, Apt. #, etc. Suite, /		a) II ata		11/23/1998	8 FL	
Sune, Apr. #, etc.		uile, Apt. #, etc.		4. FEI Number	····· ·	Applied For
City & State City				65 08769	16/	Not Applicab
Country	Zip	Cou	ntry	5. Date of Last Report	6. Cert	ificate of Status Desired
					\$8.75 A	dditional Fee Required
343 ALMERIA AVENUE CORAL GABLES FL 33134			Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc City Zip Code/)		de//	
ered office or registered agen ered agent, and accept the o	ctions 608.416 and 608.508, F ent, or both, in the State of Floric obligations.			tive vote of a majority of the	e members. I hereb	
SIGNATURE (Registered Agent Accepting Appendix ent) (NOTE Registered Agent set 10. Title Managing Members/Managers Bu			date responsit which resisted reg		City, State and Zip Code	
			ST COUNTRY	CLUB DE A		`
				000	04/16/99	24 70 01072024 ****188.
					04/16/99	0107

11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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 AND TYPE O OR PRINTED NAME OF SIGNATURE AND MEMBER ON MAYOR HE

INHSE10 R (12-98)