


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 Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED <i>48/5</i> 99 AUG -4 PM 3:25 SECRETARY OF STATE TALLAHASSEE FLORIDA	
FILING FEE \$ 588.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company  LUKIS BALSERA, L.L.C. 2601 S. BAYSHORE DRIVE, SUITE 600 MIAMI FL 33133		DOCUMENT # L98000002971			
2. Principal Place of Business 385 ALHAMBRA CIR. STE A Suite, Apt. #, etc. City & State CORAL GABLES, FL Zip 33134 Country USA		2a. Mailing Address 385 ALHAMBRA CIRCLE Suite, Apt. #, etc. SUITE A City & State CORAL GABLES, FL Zip 33134 Country USA		3. Date Organized or Qualified 12/02/1998 3a. State of Formation FL 4. FEI Number <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent  LUKIS, SYLVESTER 2601 S. BAYSHORE DRIVE, SUITE 600 MIAMI FL 33133		8. Name and Address of New Registered Agent/Office Name ALFREDO J. BALSERA Street Address (P.O. Box Number is Not Acceptable) 385 ALHAMBRA CIRCLE Suite, Apt. #, etc. SUITE A City CORAL GABLES FL Zip Code 33134			
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 <u><i>Alfred J. Balsera</i></u> DATE <u>7/28/99</u> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	BALSERA, ALFREDO	2601 S. BAYSHORE DRIVE, SU		MIAMI FL	
MGRM	LUKIS, SYLVESTER	2601 S. BAYSHORE DRIVE, SU		MIAMI FL	
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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: *Alfred J. Balsera*

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

Date

Daytime Phone #