•								
Subject LIMITE	or before May 1, 1999 to a \$ 400.00 LATE F ED LIABILITY COMPANY ANNUAL REPORT 1999	EE. FLORIDA	DEPARTM (atherine Secretary o	ENT OF STATE	D		NLED RY OF STATE CORPORATIONS AM 10: 37	
FILING	FEE Annual Report \$100	.00 + \$88.75 Corpora	ation Sup	plemental Fee	J		3,	
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9400000093]			
STEVEN GOODSTEIN, L.L.C., L.C. 242 EAST 51ST STREET NEW YORK NY 10022					1a. Principal Place of Business Address 242 EAST 51ST STREET NEW YORK NY 10022			
2 Principal Place of Business 2a. Maili			SS .		3. Date Organize	d or Qualified	3a. State of Formation	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Apt. #. etc.			09/15/1994 DE		
City P Cto	10						Applied For	
City & State		City & State	ity & State			756	Not Applicable	
Z₊p	Country	7ip	Count	гу	5. Date of Last R		6. Certificate of Status Desired \$8.75 Additional Fee Required	
7. Name and Address of Current Registered			Agent 8.		03/16/1998 Name and Address of New Regis		ered Agent/Office	
2499 Glades Road Suite, Apt. #, etc. 105 (SUITE) City Boca Raton FL 33431 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 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								
10. Title	Managing Members/Man	agers	Business Street Address			City, State and Zip Code		
MRGM	GOODSTEIN, STEVEN 242 EAST			51ST STRE	ET	NEW YORK NY		
					90	3000321 -04/01 ****18	526469 5 79901054021 38.75 ****188.75	
11. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If 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:								

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