- 2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After October 8, 1997. If Dissolved, Minimum Amount Due To Reinstate: \$703.75

SIGNATURE: _

	D LIABILITY COMPANY ANNUAL REPORT 1997	F	Sandr Secr	B. Metary of	ENT OF STATE ortham State PORATIONS		~		
FILING FEE Annual Report \$100.00 + \$103.75 Corporation Supplemental Fe					\$385.00 Late Fee	FILED			
\$ 588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Malling Address of Limited Liability Company DOCUMENT #M9500000385						97 AUG 28 PM 3: 10			
of Limited Liability Company						SECRETARY OF STATE 1a. Principal Place of Plaining Address ORIDA			
1:	OMMY BAHAMA CAFE E 241 & 1244 3RD ST. APLES FL 33940					1241 & 1 NAPLES F	244 3RD	ST.	-
If above mailing address is incorrect in any way, line through incorrect 2. Principal Place of Business 2a. Maili			t Information and enter correction in Block 2a. ing Address			3. Date Organized or Qualified 3a. State of Formation			
	AME				12/22/1995 DE				
Suite, Apt. #, etc.			Sulte, Apt. #, etc.			4. FEI Number Applied For			
City & Sta		City & State			13-3848166 Not Applicab			Not Applicable	
Ž ip	Country	Zip		Count	rv	5. Date of Last		6. Certific	ate of Status Desired
		1.0			.,	08/02/19	196	S8.75 Addi	Lional Fee Required
	7. Name and Address of Current	Registered	Agent			8. Name and Add		egistered A	gent
9. Pursua	Int to the provisions of Sections 608.416 and office or registered agent, or both, in the red agent, and accept the obligations.					d liability company s ative vote of a major	ity of the membe	rs. I hereby a	ccept the appointment
	(Registered Agent Accepting a	NOTE: Registered Agent signature required when re-instating							
10. Title	Managing Members/Managers		Business Street Address				City, State and Zip Code		
	VIEWPOINT INTERNAT		ļ.			PRESIDE	0002 -08/2	ra fl 1281 18/970	6682 01115002 ****\$583.75
indicated d limited liab	reby certify that the information supplied wi on this annual report is true and accurate a littly company or the receiver or trustee en it with an address.	ind that my s	ignature shall I	nave the	same legal effect a	s if made under oat	h; that I am a ma	naging mem	ber or manager of the