
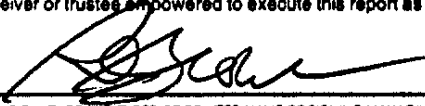


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAY -5 PM 4:22 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # 1496000000252		1a. Principal Place of Business Address	
SLT DANIA LLC 2231 EAST CAMELBACK ROAD, SUITE 410 PHOENIX AZ 85016				2231 EAST CAMELBACK ROAD, SUI PHOENIX AZ 85016	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.					
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
2231 E CAMELBACK RD				7/12/96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation	
# 400				DE	
City & State		City & State		4. FEI Number	
				65-0684546	
Zip		Country		5. Date of Last Report	
				6. Certificate of Status Desired	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				6a. Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			Suite, Apt. #, etc.		
			City		
			Zip Code		
			FL		
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 _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when renewing)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MBR/ MBR	SLT FINANCIAL PARTNERSHIP	2231 EAST CAMELBACK ROAD, STE 410		PHOENIX AZ 85016	
MBR/ MBR	SLT REALTY LP	2231 EAST CAMELBACK ROAD, STE 410		PHOENIX AZ 85016	
				600002176506--4 -05/13/97--01061--025 ****203.75 ****203.75	
				58-97	
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: 		RONALD BROWN		4/27/97 602/952-3900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Daytime Phone #	