File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY

ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS
98 MAY 22 PM 4: 11

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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE								Į				
\$ 188.	and Mailing Ad			<u> </u> 								
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9700000382									7.6			
SFM LLC								1a. Principal Place of Business Address				
THE MALL AT 163RD STREET								THE MALL AT 163RD STREET				
1421 N.E. 163RD STREET NORTH MIAMI BEACH FL 33162								1421 N.E. 163RD STREET NORTH MIAMI BEACH FL 33162				
2. Principal Place of Business 2a. Mailir					ng Address			3. Date Organized or Qualified 3a. State of Formation				
								06/27/1	997	DE		
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.				4. FEI Number Applied For					
City & Stat	е		City & State				13-3959899 Not Applicable			Applicable		
								5. Date of Last Report		6. Certificate of Statu	s Desired	
Zip	Country			Zip		Countr	у			\$8.75 Additional Fee Res	uned	
7. Name and Address of Current Registered							8.	Name and Address	of New Regis	ered Agent/Office		
BROWN, MORTON P 100 SE 2ND STREET, 17TH FLOOR							Name					
							Street Address (I	P.O. Box Number is Not Acceptable)				
MIAMI FL 33131								60000253 74 269 -05/2 7/9801098002				
						Suite, Apt. #, etc.			****188.75 ****188.75			
						City				Zip Code	1	
									<u>FL</u>	// <u>/</u> /	VII.	
9. Pursua	int to the provis	ions Sect ist dage t	ins 60 a.416 at orbotic in the	id 618.908 Slate)d Før	oove-named limited uthorized by affirms	l liability company so ative vote of a majorit	ubmits this state y of the member	ment for the purpose di s. Thereby accept the ap	changing pointment			
9. Pursuant to the provisions. Sections 60 .416 and 618.50d Florida Statutes, the above-named limited liability company submits this statement for the purpose of changin its registered office or register, or both, in the States of brida. 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 (If florith and Accounts a Maintena (NOT) Registered Amont signature required when reinstating								(DATE 5			
10. Title Managing Members/Managers							ss Street Address	City, State and Zip Code				
MGR	FFM HC	LDING	CORP,	:	380 1	MADIS	N AVENUE	E, 9TH FL	NEW YO	RK NY		
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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. 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 hability 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.

FEM. HOLDENG CORP.

SIGNATURE

MEAND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

May /8 , 1998 212-622-36