
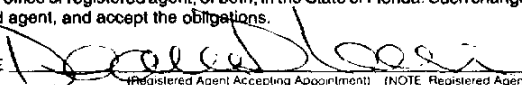
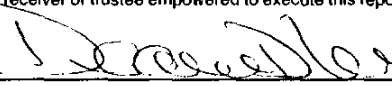


2nd and File on or before Sept. 29, 1999 or Limited Liability Company
FINAL NOTICE: will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 19 AUG -9 PH 3:50 8/9	
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		DOCUMENT # M98000001470		SECRETARY OF STATE TALLAHASSEE FLORIDA	
ELAD PROPERTIES, LLC 42 BEACH WAY CALVERTON NY 11933		1a. Principal Place of Business Address 42 BEACH WAY CALVERTON NY 11933			
2. Principal Place of Business Elad Properties, LLC Suite, Apt. #, etc. 10132 US Hwy. 19 City & State Port Richey, FL. Zip 34668 Country USA		2a. Mailing Address Elad Properties, LLC Suite, Apt. #, etc. 24296 Seaside Rd. City & State Seaview, VA. Zip 23429 Country USA		3. Date Organized or Qualified 12/10/1998 3a. State of Formation NY 4. FEI Number 54-1745546 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 NATIONAL CORPORATE RESEARCH, LTD., IN 1406 HAYS STREET, SUITE #2 TALLAHASSEE FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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 7/27/99 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	THE LEWIN FAMILY LIM,	42 BEACH WAY 24296 Seaside Rd.		CALVERTON NY Seaview, VA 23429 100002962431--8 -08/17/99--01071--004 ****588.75 ****588.75	
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:  David Lewin 7/27/99 4801 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #					