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

LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

1998			Secretary of State DIVISION OF CORPORATIONS		98 MAY -7 PM 5: 04	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						
Name and Malling Ad- of Limited Liability Co	Idress Impany DOCU	MENT# z003	66			
ር ጀምርክ 1	175TH STREET	T. C	:	1a. Principal Place of Busi	iness Address	
2250 NE	E 163RD ST.	, п.с.		2250 NE 163RD ST.		
SUITE (5 MI BCH. FL 3	3160	SUITE 6 N. MIAMI BCH. FL 33160			
N. MIM	u ben. Fi 5	3100		N. MIAMI BC	n. FL 33160	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qual	ified 3a. State of Formation	
1595_NE 163RD STREET		1595 NE 163RD STREET		03/28/1991	FL	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For	
City & State		City & State				
				65-0279015 5. Date of Last Report	Not Applicable Status Desired	
Zip	Country	Zip	Country	3. Date of Cast Report		
33162		33162		05/01/1997	\$8.75 Additional Fee Required	
7. Name	and Address of Current	Registered Agent	Name	Name and Address of New	Registered Agent/Office	
GOLDSMITH, 2250 NE 163 SUITE 6 N. MIAMI BO			1595 NE 1 Sulte, Apt. #, etc.			
^			City	1	Zip Code 33162	
Pursuant to the provisions of Sections 605.416 and 608.508, Flor its registered office or registered agent, or both, in the State of Florida. Its registered agent, and accept the obligations. Signature (Registered Agent Agent Agent Inc.) (NOTE 1)			s, the above-named limited e was authorized by affirmat ant signature required when reinstaling	liability company submits this live vote of a majority of the me DATE	s statement for the purpose of changing embers. I hereby accept the appointment	
10. Title Managing Members/Managers		······································	Business Street Address	,	City, State and Zip Code	
MEM GOLDSM	MITH, JAMES	A. 2250 N	E 163RD ST.,	8-6 N M	IAMI BCH. FL	
MEM GOLDSMITH, WILLIAM		M 2250 N 1595	E 163RD ST.,	S-6 N M	IAMI BCH. FL	
MEM MISKA, DOUGLAS		_	E 163RD ST.,	S-6 N M	IAMI BCH. FL	
					12519609-8 /12/9801018-003 **188.75 ****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. 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 trades 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:

(305) 949-9049