		May 1, 1998 or 0.00 LATE FEE		d Liability	Com	pany will be					
	D LIABILIT ANNUAL RI 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			DIVISION OF CORPORATIONS 98 FEB 26 PM 12: 4:1					
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE]	CO P/	112: 47	// (.	
1. Name	and Mailing Add ted Liability Con	1									
KRYLLY MANAGEMENT COMPANY, 701 MARINE DRIVE BOCA RATON FL 33431					Y, L.C.			1a. Principal Place of Business Address 701 MARINE DRIVE BOCA RATON FL 33431			
2. Principal Place of Business 2a. Maili				ng Address			3. Date Organize	ed or Qualified	3a. State	of Formation	
Suite, Apt. #, etc. Suite, A				pt. #, etc.			09/10/1	.992	FL		
				State			4. FEI Number			Applied For	
						•	65-0477671 5. Date of Last Report		6. Certific	Not Applicable ate of Status Desired	
Zip		Country	Zip		Countr	'у	01/31/1	997	58 75 Add	tional Fee Required	
	7. Name	and Address of Current	Registered	Agent	<u> </u>	8. Name	Name and Addres		tered Ager	t/Office	
KRICKEMEYER, ACHIM 701 MARINE DRIVE BOCA RATON FL 33431						Street Address (P.O. Box Number is Not Accept Suite, Apt. #, etc.			Zip Code		
its register as registe	red office or regis red agent, and a	ons of Sections 608.416 a stered agent, or both, in the accept the obligations.					itive vote of a majorit	ubmits this state			
				NOTE Registered Age	OTE Registered Agent signature required when reinstating			City. State and Zip Code			
10. Title	itle Managing Members/Managers				Business Street Address			City	, State and .	Zip Code	
MGRM	MGRM KRICKEMEYER, ACHIM R.				701 MARINE DRIVE			BOCA I	RATON	FL	
MGRM	BLOSER, MANFRED			701 MARINE DRIVE				BOCA I	RATON	FL	
							50	0002 -03/03 *****1	1 445 3/980 197.50	4451 01046021 ****197.50	
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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 liability company or the receiver of 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: (A(H)H KLICKE HEYER) 2/24/1998 561-750-18/11 SIGNATURE Date Daylore Phone #											