2000 UNIFORM BUSINESS REPORT (UBR) A32968 DOCUMENT # 1. Entity Name **GULL HOUSE LIMITED NO. 8** FILED APR 18 AM 9: 20 Principal Place of Business Mailing Address 2300 CORAL WAY 2300 CORAL WAY YEGRETARY OF STATE SUITE 200, CANTELOP BLDG SUITE 200, CANTELOP BLDG MIAMI FL 33145-3511 MIAM! FL 33145 2. Principal Place of Business 3. Mailing Address 717 N. Bavshore Drive <u>1717 N. Bavshore Drive</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 208 Suite 208 City & State 4. FÉI Number Applied For City & State 65-0333499 Not Applicable Miami, Flori Miami .Florida Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33132 33132 USA USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name S & K PROPERTY MANAGEMENT INC. FLORIDA ANNUAL REPORT SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1717 No. BAYSFORE DRIVE 2300 CORAL WAY, CANTELOP BLDG., STE 200 **MIAMI FL 33145** SUITE 208 City MIAMI 8. The above named entity subgrits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida LIDIA CARTAYA, VICE-PRES (NOTE: Registered Agent signature required when reinstating) SIGNATURE gent and title if applicable. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE \$300,000.00 10. Amount of Capital Contributions 9. Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. 12. \$99684 DOCUMENT # STREET ADDRESS INVESTMENTS OF AMERICA NO. 1, INC. NAME 1717 No. BAYSHORE DRIVE, SUITE # 208 2300 CORAL WAY, CANTELOP BLDG., STE. 200 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33145 CITY-ST-ZIP MIAMI, FL 33132 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS -04/26/00--01092--013 CITY-ST-ZIP CITY-ST-ZIP *******8.75 ******8.75 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 300003225393 DOCUMENT# -04/26/00 --01092--014 STREET ADDRESS NAME ****5<u>26.25 ****526.25</u> STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP طىد CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME

14. Thereby 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

SIGNATURE:

STREET ADORESS

CITY - ST - ZIP

SIGNATURE REQUIRED

BY LIDIA CARTAYA, VICE-PRESIDENT OF GENERAL PARTNERSHIP.

3/31/00 Date (305) 854-1040 hone