

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**A9600001967**



FLORIDA DEPARTMENT OF STATE  
Sandie Northing  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

**97 JAN 31 PM 12:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

<b>1. Name of Limited Partnership</b> <b>MARMORSTEIN FAMILY PARTNERSHIP NO. II, LTD.</b>		<b>1a. DOCUMENT #</b> <b>A96000001967</b>	
<b>2. Mailing Address</b> 12466 S.W. 128th Street Miami, Florida 33186		<b>2a. Principal Office Address</b> 12466 S.W. 128th Street Miami, Florida 33186	
<b>3. Date Formed or Registered</b> 10/21/1996		<b>5a. Capital Contributions as Shown on record.</b> 10,000.00	
<b>3a. Date of Last Report</b> N/A		<b>5b. Amount of Capital Contributions in FLORIDA to date</b> \$361,957.61	
<b>4. State or Country of Formation</b> Florida		<b>6. FEI Number</b> 65-0703127	
<b>7. Certificate of Status Desired</b> <input type="checkbox"/> \$6.75 Additional Fee Required		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b>			

<b>9. Name and Address of Current Registered Agent</b> <b>MIAMI CORPORATE SYSTEMS, INC.</b> 5200 Blue Lagoon Drive Suite 700 Miami, Florida 33126	<b>10. If changed, new Registered Agent/Office</b> Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt #, etc. City FL Zip Code
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**10a.** Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment): *Sharon Newton* ASSISTANT Vice President DATE: 1/30/97

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

<b>11. Name(s) of General Partner(s)</b> MARMORSTEIN FAMILY ENTERPRISES, INC., a Florida corporation	<b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b> 12466 S.W. 128th Street	<b>11b. City, State &amp; Zip Code</b> Miami, FL 33186	<b>11c. Registration/Document Number</b> P96000083423
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-02/07/97--01008--004  
\*\*\*541.25 \*\*\*541.25

dec 541.25 (new fees)

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

**12.** I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE By: *Irwin Marmorstein* DATE: 1/30/97  
Typed or Printed Name of General Partner Signing Form: **Irwin Marmorstein, President** Daytime Telephone Number: **(305) 252-1018**

CR2E003 (6/96)