

APPLICATION FOR
REINSTATEMENT
FOR



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAY 11 PM 3:32

LIMITED PARTNERSHIP

Annual Report 1998
DOCUMENT # *A97000000428*

1. Name of Limited Partnership

THE CAYON FAMILY LIMITED PARTNERSHIP NO.1

DO NOT WRITE IN THIS SPACE

2. Mailing Address
19700 W. St. Andrews Drive

3. Principal Office Address

4. Date Formed or Registered To Do Business in Florida
FEBRUARY '97

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number
65-0739488

Applied For

City & State
Miami Country Club, Florida

City & State

Not Applicable

Zip Country
33015 U.S.A.

Zip Country

6. CERTIFICATE OF STATUS DESIRED \$175 Additional Fee required for a Certificate of Status

7. State or Country of Formation
Florida

8a. Capital Contributions as Shown on Record
\$15,000,000.00

FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8b. Amount of Capital Contributions in FLORIDA to date.

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

Alexander M. Salgado, C.P.A.
c/o MALLAH, FURMAN & COMPANY, P.A.
1001 Brickell Bay Drive - Suite 1400
Miami, Florida 33131

Name ROBERTO CAYON
Street Address (P.O. Box Number Is Not Acceptable)
19700 W. St. Andrews Drive
Suite, Apt. #, etc.
City Miami Country Club FL Zip Code 33015

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)

DATE 4-21-98

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

11. Names of General Partner(s)

Address of Each General Partner (Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration Document Number

ROBERTO CAYON
Gladys Cayon

19700 W. St. Andrews Dr. Miami Country Club, FL 33015
19700 W. St. Andrews Dr. miami country club, fl 33015

not

900002521259--9
-05/13/98--01004--025
****535.00 ****535.00

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

DATE 4-21-98

Roberto Cayon

Telephone Number (305)823-6721

Typed or Printed Name of General Partner Signing Form

CR2E039 (12/97)