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PLEASE READ	ALL INSTRUCTIONS BEFOR	RE COMPLETING THIS FO	RM. (1	
LIMITED PARTNERSHIP REINSTATEMENT  PARTNERSHIP REINSTATEMENT  FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS			FILED 00 DEC 26 AM 9: DO	
DOCUMENT #  1. Name of Limited Partnership  PROMOTO GNTER PRISES	99-2195 1,200000219		SECRETARY OF STATE ALLAHASSEE, FLORIDA	
2. Principal Office Address 2800 YACHT CLUB BLVD Suite, Apt. #, etc.	3. Mailing Office Address 28% YACHT CLUB BLVD Suite, Apt. #, etc.	5. FEI Number	12/22/49 Applied For	
# N L  City & State  - FONT LAUDENDALE, FL	# NV City & State FORT LAUDERDALE, FL.	65 - 69)3709  6. CERTIFICATE OF STATUS DESIRED		
Zip Country 33304 USA	Zip Country 333304 USA	7a. Capital Contributions as strown or 10 000,000 - 00 7b. Amount of Capital Contributions in 2, 975,916		
Street Address (P.O. Box Number is Not Acceptable)  49 LS SHERIOAN STREET  Suite, Apt. #, Etc.  SUITE A  City #oury wood,  Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organ		in 7b, with a minimum filing fee of \$5/ for each year due this office.  2.) Supplemental Fee(s): \$88.75 for each with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for a Note: If the amount entered in 7b is a 7a, a supplemental affidavit must be a and appropriate filing fee.	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 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.	
for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of some state of the obligations of some state of the source of the purpose of changing and some state of the purpose of changing its registered Agent Accepting Appointment)	stered agent, or both, in the State of Florida. Such change section 620, 192, Florida Statutes.  IS A CORPORATION, LIMITED	DATE	SR S	
10. Name(s) of General Partner(s)	BE REGISTERED AND ACTIVATION Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number	
PROMOTO MANAGEMENT, MC.	2800 YACHT CLOS SCUD # NU	FT LAVOSLOALE, FL 33304	P9900110374	
- v		1000035 -01/09/0 ***1039	299618 101069017 .00 ***1035.00	
Cornerations from any liability of pan compliance wit	this filing is voluntarily furnished and does not qualify for the Section 119.07(3)(i) in the event that the information suply signature shall have the same legal effects as if made u	he exemption stated in Section 119.07(3)(i), Florida Sta	tutes, I release the Division of	
SIGNATURE	O STATE OF S	DATE		

Telephone Number \_

Typed or Printed Name of General Partner Signing Form