

A95000000433

CREDITORS RECOVERY SERVICES, INC.

304 S. MILITARY TRAIL
DEERFIELD BEACH, FLORIDA 33442

(305) 429-4991

(305) 690 0057 FAX

Secretary of the State
409 E. Gaines St.
Tallahassee, Fl 32399

300001435473
-03/21/95--01127--013
****525.00 ****07.50

Re: VinFlo Management, Inc.

We enclose for recording or filing the following checked documents:

- _____ Financing statement - UCC
- _____ Termination of financing statement
- x Articles of Incorporation
- _____ Trademark Application
- _____ Articles of Amendment of Corporation
- _____ Assignment for the Benefit of Creditors
- _____ Real Estate Mortgage
- x-6 Limited Partnership
- _____ Copyright Application

FILED
 1995 MAR 17 AM 2:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

W95000005967

Name	3/17/95
Availability	disc
Document Examiner	DCC
Updater	DCC
Updater Verifier	
Agmt. Judgment	DCC
Updater Verifier	DCC

Assent form

Other: _____

A95000000433

C. TAX	_____
FILING	\$7.50
RECORDING FEE	_____
C. FEE	_____
TOTAL	_____
RECEIVED	_____

Recording fees (if applicable) of \$122.50 ^{\$25.00} are enclosed. Please return proof of filing to the undersigned and we thank you for your cooperation.

Very truly,

\$1,000.00

CERTIFICATE OF LIMITED PARTNERSHIP

OF

1. Caggia Westwood Family Limited Partnership
(Name of Limited Partnership: must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1318 S.E. 14th Terrace, Deerfield Beach, Fl 33441
(The Business Address of Limited Partnership)
3. Vincent P. Caggia, Sr.
(Name of Registered Agent for Service of Process)
4. 1318 S.E. 14th Terrace, Fl 33441
(Florida street address)
5. *Vincent P. Caggia Sr.*
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process.)
6. 1318 S.E. 14th Terrace, Deerfield Beach, Fl 33441
(The Mailing Address of the Limited Partnership.)
7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2060.

8. NAME OF GENERAL PARTNER(S)

SPECIFIC ADDRESS

Vin Flo Management, Inc.

1318 SE 14th Terrace,
Deerfield Beach, Fl 33441

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1995 MAR 7 AM 2:00
TALLAHASSEE

Signed this 7 day of MARCH, 1995.
Signature of all general partners:

James P. Caggia Sr.
General Partner

General Partner

General Partner

General Partner

General Partner

FILED
1995 MAR 17 AM 2:00
SEC. OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of Caggia Westwood Family Limited Partnership, a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$ 1,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$1,000.00.

This 7 day of MARCH, 1995.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

James A. P. Caggia &
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

FILED
1995 MAR 17 AM 10
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
TAMM A. SKOTTEN
Secretary of State
DIVISION OF CORPORATE FILINGS

FILED

95 DEC 15 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Form of Limited Partnership

1a. DOCUMENT #
A95000000433

CAGGIA WESTWOOD FAMILY LIMITED PARTNERSHIP

2. New Mailing Address, if Applicable

Mailing Address

1318 S.E. 14TH TERRACE
DEERFIELD BEACH FL 33441

New Post Office Address

1310 S.E. 14TH TERRACE
DEERFIELD BEACH FL 33441

State, Apt. #, etc.

City, State & Zip

XXXXXXXXXXXX
-12220-95--01037--022

2a. New Principal Office Address, if Applicable

State, Apt. #, etc.

If above addresses are incorrect in any way, file through this as correct information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
03/17/1995

3a. Date of Last Report

4. State or Country of Formation
FL

City, State & Zip

5a. Capital Contributions as Shown on Record
\$1,000.00

5b. Amount of Capital Contributions in FLORIDA to date
\$ 1000.00

6. FIC Number
65-056 8685

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
\$5.75 Additional Fee required for a Certificate of Status

8. FEES: 1) Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if not blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

[Signature]
12-19

9. Name and Address of Current Registered Agent

CAGGIA, VINCENT P SR
1318 S.E. 14TH TERRACE
DEERFIELD BEACH FL FL334-41

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
State, Apt. #, etc.
City
FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 naming with and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Required Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/Document Number

VIN FLO MANAGEMENT, INC.

1318 SW 14TH TERRACE

DEERFIELD BEACH FL 33

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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 119.05(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.05(3)(b) 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 effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to file this report as required by chapter 620, Florida Statutes.

SIGNATURE *Vincent P. Caggia Sr.*
Typed or Printed Name of General Partner Signing Form **VINCENT P. CAGGIA, SR**

DATE **12/12/95**
Telephone Number **305-570-4069**

CR2E003 (6/95)