A95000000434

CREDITOR RECOVERY SERVICES, INC.

384 S. MILITARY TRAIL

DEERFIELD BEACH, FLORIDA 33442

(305) 420-4001

(305) 698-0057 FAX

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

400001435474
-03/21/95--01127--013
*****525.00 *****87.50

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

W95000005968

_____ Assent form

_____ Other:

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

C. TAX 87.50

Name Availability	3/17/95 dee
Document Examiner	
Updater	
Updater Verifyer	
Acknowledgement	DCC
W. P. Verifyer	DCC

Recording fees (if applicable) of ~~$122.50~~ $525.00 are enclosed. Please return proof of filing to the undersigned and we thank you for your cooperation.

Very truly,

A95000000434

CERTIFICATE OF LIMITED PARTNERSHIP

OF

1. Caggia Northeast 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.)

FILED
1995 MAR 17 PM 2:00

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
P95000021783	

Signed this 7 day of March, 1995.

Signature of all general partners:

Vincent P. Caggia Jr.
General Partner

General Partner

General Partner

General Partner

General Partner

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

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of Caggia Northeast 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.

FILED
95 MAR 17 AM 2:00

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.

General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

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
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 DEC 15 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

CAGGIA NORTHEAST FAMILY LIMITED PARTNERSHIP

1a. DOCUMENT # A95000000434

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

Principal Office Address
1318 S.E. 14TH TERRACE
DEERFIELD BEACH FL 33441

If above addresses are incorrect in any way, line through the incorrect information and note correct address in Block 2 and/or 2a

2. New Mailing Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip

300001885743
-12/20/95--01097--021
****191.25 ****191.25

2a. New Principal Office Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip

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

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

5b. Amount of Capital Contributions in FLORIDA to date $ 1,000.00

6. FEI Number 65-0564764

7. CERTIFICATE OF STATUS REQUIRED
Applied For
Not Applicable
$8.75 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 5b or 5a if 5b 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

12-19

9. Name and Address of Current Registered Agent
CAGGIA, VINCENT P SR
1318 S.E. 14TH TERRACE
DEERFIELD BEACH FL 33441

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City FL Zip Code

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

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 SE 14TH TERRACE	DEERFIELD BEACH FL 33	P95000021783

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 effect 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 Vincent P. Caggia Sr. DATE 12/12/95

Typed or Printed Name of General Partner Signing Form VINCENT P. CAGGIA, SR Telephone Number 305-570-4069

CR2E003 (6/95)

0007205