

APPLICATION FOR
 REINSTATEMENT
 FOR
 LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
 Kathleen Harris
 Secretary of State
 DIVISION OF CORPORATIONS

A92000000160

FILED
 20 AUG 15 AM 8:30
 SECRETARY OF STATE

DOCUMENT # A92000000160
 1. Name of Limited Partnership
WINDRIDGE FAMILY INVESTMENTS, LTD.

DO NOT WRITE IN THIS SPACE

2. Mailing Address 2100 Salzedo Street		3. Principal Office Address 801 Seabreeze Blvd.		4. Date Formed or Registered To Do Business in Florida 12/14/1992	
Suite, Apt. #, etc. Suite 303		State, Apt. #, etc.		5. FEI Number 65-0477944	
City & State Coral Gables, FL		City & State Fort Lauderdale, FL		Applied For Not Applicable	
Zip 33134-4323	Country USA	Zip 33316	Country USA	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. State or Country of Formation Florida					

8a. Capital Contributions as Shown on Record
12.00

8b. Amount of Capital Contributions in FLORIDA to date

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.

9. Name and Address of Current Registered Agent FRANK R. BRADY, ESQ. c/o FRANK BRADY P.A. 370 Camino Gardens Blvd., #341 Boca Raton, FL 33232 US		10. If changed, new registered agent/office Name ELLIOT LOWENSTEIN Street Address (P.O. Box Number Is Not Acceptable) 2100 Salzedo Street #303 Suite, Apt. #, etc. City Coral Gables Zip Code FL 33134-4323	
--	--	---	--

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): *Elliot Lowenstein* DATE: **8/9/99**

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
FREDERICK WINDRIDGE	2 Isla Bahia Terrace	Fort Lauderdale, FL 33416	9799 000002969760--4 -08/25/99--01089--001 ***1923.75 ***1923.75
KATHLEEN WINDRIDGE	2 Isla Bahia Terrace	Fort Lauderdale, FL 33416	

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: *Frank R. Brady* DATE: **8/12/99**
 Typed or Printed Name of General Partner Signing Form Telephone Number

CR2E039 (1/2/98)