

A0000000385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

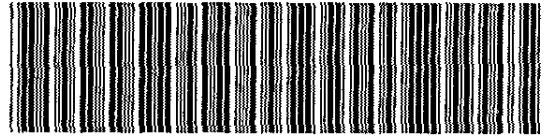
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TALLAHASSEE, FLORIDA
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REALTY TITLE PROFESSIONALS LTD., LLLP
2728 NORTH HARWOOD STREET
DALLAS, TEXAS 75201

04/02/2004

Florida Division of Corporations

P.O. Box 6327
Tallahassee FL 32314-6327

CERTIFIED MAIL # 7002 2030 0006 2214 0575

Gentlemen:

Enclosed is the following :

Return: FL L.P. Annual Report
Period: 2004
Amount: UBR = \$309.25
Supplemental Affidavit Fee = \$52.50

04 MAY 11 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Very truly yours,



Enclosures

TAX DEPT SLM

MAILING ADDRESS: P.O. BOX 199000 DALLAS, TEXAS 75219

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of REALTY TITLE PROFESSIONALS, LTD., LLLP

_____, a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 31,500.00

This 31st day of DECEMBER, 2003

FURTHER AFFLANT SAYETH NOT.

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

General Partner(s)

METROPOLITAN TITLE & GUARANTY COMPANY



| |
|--|
| <p>Fees: \$7 per \$1000, based on additional contributions Minimum \$ 52.50 Maximum \$1750.00</p> |
|--|

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TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314