PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS TOP OF STATE		
LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	06 mm PORATIONS
DOCUMENT # A0000001036  1. Name of Limited Partnership		
JERMC Ltd.		
2. Principal Office Address 18298 Sunset Blvd.	3. Mailing Office Address	CR2E039 (11/05)
Suite, Apt. #, etc. #1	Suite, Apt. #, etc.	4. Date Formed or Registere 06-27-2000
Redington Shores, FL	City & State	55-3671333 Applied For Not Applicable
33708 Country Pinellas	Zip Country	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
8. Name and Address o	Current Registered Agent	7. FEES:
JERMC Management	Corp.	Filing Fee(s): \$411.25 for each year due this office.
18298 (PS BY Number is BIVO.		Supplemental Fee(s): \$88.75 for each year due this office.
Suita, Apt. #, Etc.		Penalty Fee(s): \$500 for each year or part thereof limited
Redington Shores	State 33708 Code	partnership revoked on our records
9. Pursuant to the provisions of section 620 1810 or 620 1909, Florida Statutes, hereby accept the appointment of registered agent. Lam familiar with, and accept the obligations of Chapter 620, Florida Statutes.		
SIGNATURE (Registered Agent Accepting Appointment)	Malel	DATE 6/28/06
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY		
	BE REGISTERED AND ACTIVE  Address of Each General Partner	Registration
10. Name(s) of General Partner(s)	(Do NOT Use Post Office Box Numbers)	Document Number
JERMC Management Corp	o. 18298 Sunset Blvd. #1 R	edington Shores, FL 33708 P00000624 <b>5</b> 6
		\$0007734555 07/11/06-01036007 **3000.00
	(S)	EKSTATEMENT 04-06
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Note: General partners MAY NOT	be changed on this form: an amen	dment must be filed to change a general partner.
11. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I release the Division of Corporations from any liability of con-compliance with Chapter 119. F.S. 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.	DATE 06-29-2006
Typed or Printed Name of General Partner Signing Form Nashaat Antonious, President Telephone Number 727-381-2300		