


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 2003 NOV 10 PM 3: 31 DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA 600024550656 11/10/03--01011--019 **1026.25	
DOCUMENT # A01000000616					
1. Name of Limited Partnership Cisneros Investment Group IV, Ltd					
2. Principal Office Address 330 Dolias Court Suite, Apt. #, etc.		3. Mailing Office Address 330 Dolias Court Suite, Apt. #, etc.		4. Date Formed or Registered To Do Business In Florida April 29, 2002	
City & State Coral Gables FI		City & State Coral Gables, FI		5. FEI Number 65-1100905 <div style="float: right;"><input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable</div>	
Zip 33143	Country USA	Zip 33143	Country USA	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
8. Name and Address of Current Registered Agent				7a. Capital Contributions as shown on Record: 125,000.00	
Name Yaquelin Tous				7b. Amount of Capital Contributions in FLORIDA to date: 125,000.00	
Street Address (P.O. Box Number is Not Acceptable) 4025 NE 2nd Avenue				FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, 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. <small>Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.</small>	
Suite, Apt. #, Etc.					
City Miami	State FL	Zip Code 33137			
9. 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 11/04/2003	
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
10. Name(s) of General Partner(s)		Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State and Zip Code	
Cisneros Capital Group, Inc		330 Dolias Court		Coral Gables, FI 33143	
				10a. Registration Document Number P00000033796	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
11. 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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 _____				DATE 11/04/2003	
Typed or Printed Name of General Partner Signing Form James Blanchard Cisneros, President				Telephone Number 572-1802	

CR2E039 (10/02)