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Palm Beach, Florida 33480
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 1, 2005

WILSHIRE INTERNATIONAL REALTY CO. 125 WORTH AVENUE PALM BEACH, FL 33480

SUBJECT: DURACH FAMILY LTD. Ref. Number: A05000000073

We have received your document for DURACH FAMILY LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to change the Registered Agent for this Limited Partnership, the form submitted is for a Limited Liability Company. Also, the filing fee is \$35.00.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 305A00007043

Michelle Hodges Document Specialist

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	DURACH FAMIL	Y LTD.		
		Name of the limited partnership		
?	1/6/05	3 A0500000073		
۷	Date of filing/regis	tration in Florida Document number assi	Document number assigned	
4.	The name of the regi	stered agent and the registered office address as shown on the	ne records of the Florida	
		RAE FRANKS, ESQ.	** *	
		312 9th. STREET		
		Address		
		WEST PALM BEACH, FL. 33401-3314		
		City, State and Zip		
5.		SS of the new registered agent and/or office: TANLEY FRANKS Name	05 FEB 1	
	1:	25 WORTH AVE SUITE 314	.∓ [*	
	<u></u>	Florida street address (P.O. Box not acceptable)		
	PA	ALM BEACH FL 33480	in the second se	
6.	Such change(s) was/2	City, State and Zip Wexexauthorized by the general partners.	क कि	
<u></u>		<u></u>		
Sig	nature of General Partner			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Signature of Registered Agent STAULEN FRAUKS

Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00