


APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # A32512 1. Name of Limited Partnership SPV PARTNERS, LIMITED PARTNERSHIP		FILED 97 JUN -2 PM 2:58 SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE.	
2. Mailing Address 2875 N.E. 191st Street Suite, Apt. #, etc. 400 City & State Aventura, FL Zip 33180 Country U.S.A	3. Principal Office Address SAME Suite, Apt. #, etc. City & State Zip Country	4. Date Formed or Registered To Do Business in Florida 1/28/92	5. FEI Number 58-1599406 Applied For Not Applicable
8a. Capital Contributions as Shown on Record: 6,750.00		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status.	
8b. Amount of Capital Contributions in FLORIDA to date 6,750.00		7. State or Country of Formation Florida	
9. Name and Address of Current Registered Agent Donald Soffer c/o Turnberry Associates 2875 N.E. 191st Street, Suite 400 Aventura, FL 33180		10. If changed, new registered agent/office Name Raymond J. Parelló Street Address (P.O. Box Number is Not Acceptable) 2875 N.E. 191st Street Suite, Apt. #, etc. Suite 400 City Aventura, Zip Code FL 33180	
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) <i>[Signature]</i> DATE			
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
SOFFER/ORLANDO, INC.	2875 N.E. 191st Street Suite 400	Aventura, FL 33180	H40714
4000002201384--7 -06/04/97--01060--010 ****656.25 ****656.25 REINSTATEMENT 97 dec 300.00 52.50 103.75			
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 <i>[Signature]</i>		DATE 5/22/97	
Typed or Printed Name of General Partner Signing Form Donald Soffer, President		Telephone Number (305) 937-6200	

CR2E039 (1/97)