| DOCUMENT # A32924  1. Entity Name  MINORCA HOLDINGS, LTD.   |   |   |   |   |   | F   | ILED<br>BY OF STATE   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|--|
|   |   |   |   |   |   |   | FILED<br>SECRETARY OF STATE<br>DIVISION OF CORPORATIONS   |   |   |  |
| Principal Pla   | on of Busines   |   | Mailing Address   | ·····   |   | 00 JUL 3  | 1 PM 1: 25  |   |   |  |
| 2811 N.E. 48TH STREET 2811 N.E. 48TH STREET   |   |   |   |   | <b></b> .   |   | · · ·   |   |   |  |
| LIGHTHOUSE  | POINT FL 33   | 064   | LIGHTHOUSE POINT FL   | 33064   |   | )<br>   | JOHN TIMO MAKANTANIN MAKANTANI  |   | 118() 218() 8(8); 2(8)( (8)   |  |
| 2. Principal Place of Business  Suite, Apt. #, etc.  5241 SW Windward Way   |   |   | 3. Mailing Address  Suite, Apt. #, etc.  5241 SW Windward Way                             |   |   |   |   |   |   |  |
|   |   |   |   |   | DO NOT WRITE IN THIS SPACE                                  |   |   |   |   |  |
| City & Sta  | te  | 7. F-1  | City & State Palm City  | FI  |   | 4. FEI Numbe  | 65-0328112  |   | Applied For<br>Not Applicable   |  |
| 3 <u>499</u>  |   | Country<br>US A   | 34990   | Country<br>U-S-F  | 1.  |   | of Status Desired   | Fee                                     | .75 Additional Required   |  |
| 6. Name and Address of Current Registered Agent   |   |   |   |   | ne .  | 7. Name and Address of New Registered Agent             |   |   |   |  |
| KRAMER, ROBERT M.<br>KRAMER & ZUCKERMAN, P.A.   |   |   |   | Stre  | Street Address (P.O. Box Number is Not Acceptable)          |   |   |   |   |  |
|   | ,   | BLVD., SUITE 485 SO.  |   |   |   |   |   |   |   |  |
| HOLLYWOOD FL 33021  |   |   |   |   |   | City FL Zip Code  |   |   |   |  |
|   |   | y submits this statement f  | or the purpose of changing its  | s registered offic  | e or register   |   | , in the State of Florida.  |   | Zip Code  |  |
| SIGNATURE   | Signature, typed ontributions on record.                              | y submits this statement f or printed name of registered agen \$9,900.00 GENERAL PARTNER  | 10. Amount of Capi<br>in FLORIDA to c   | E: Registered Agent stal Contributions late.  | e or register   | when reinstating)                                       | n, in the State of Florida.  DA  11. MAKE CHECK PAYA  SEE REVERSE SIDI  | ABLE TO<br>E FOR FI                     | DEPT. OF STATE<br>EE INFORMATION                                      |  |
| SiGNATURE 9. Capital Co   | Signature, typed ontributions on record.                              | y submits this statement f or printed name of registered agen \$9,900.00 GENERAL PARTNER  | 10. Amount of Capi<br>in FLORIDA to c<br>THAT IS A BUSINESS EN<br>AY NOT be changed on to | E: Registered Agent stal Contributions late.  | e or register   | when reinstating)                                       | n, in the State of Florida.  DA  11. MAKE CHECK PAYA  SEE REVERSE SIDI  | ABLE TO<br>E FOR FI<br>FICE.<br>partne  | DEPT. OF STATE<br>EE INFORMATION                                      |  |
| 9. Capital Coas Shown  12.  DOCUMENT #  | Signature, typed ontributions on record.  A ( NOTE:                   | y submits this statement for printed name of registered agen \$9,900.00  GENERAL PARTNER GENERAL PARTNE  GENERAL PARTNE                     | 10. Amount of Capi<br>in FLORIDA to c<br>THAT IS A BUSINESS EN<br>AY NOT be changed on to | E: Registered Agent stal Contributions late.  ITITY MUST E the form; an a   | e or registeri<br>ignature required<br>BE REGIST<br>mendmen | ERED AND At must be filed                               | 11. MAKE CHECK PAYA<br>SEE REVERSE SIDI<br>CTIVE WITH THIS OFF<br>to change a general   | ANTE ABLE TO E FOR FI FICE. partne ONLY | DEPT. OF STATE<br>EE INFORMATION<br>Y.                                |  |
| 9. Capital Coas Shown  12.  DOCUMENT # HAME STREET ADDRESS CITY-ST-ZIP  | Signature, typed ontributions on record.  A ( NOTE: WARSAGE 2811 N.E. | y submits this statement for printed name of registered agen \$9,900.00  GENERAL PARTNER  GENERAL PARTNE                                    | 10. Amount of Capi<br>in FLORIDA to c<br>THAT IS A BUSINESS EN<br>AY NOT be changed on to | E: Registered Agent stall Contributions late.  ITITY MUST E he form; an a 13.   | e or registero  | ERED AND At must be filed                               | 11. MAKE CHECK PAYA<br>SEE REVERSE SIDI<br>CTIVE WITH THIS OFF<br>to change a general<br>ADDRESS CHANGES  | ABLE TO<br>E FOR FI<br>FICE.<br>Partne  | DEPT. OF STATE<br>EE INFORMATION<br>Y.                                |  |
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7/24/00 JACKS WARSAGER
Date Dayline Phone #