

APPLICATION FOR
REINSTATEMENT
FOR



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP

Annual Report, 1998
DOCUMENT # A93000000688

1. Name of Limited Partnership
BYRONAIR APARTMENTS, LTD.

FILED
98 MAY -5 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

| | | | | | |
|---|-----------------|---|---------|---|--|
| 2. Mailing Address 1882 BRICKELL AVE. Suite, Apt. #, etc. | | 3. Principal Office Address Same as #2 Suite, Apt. #, etc. | | 4. Date Formed or Registered To Do Business in Florida APR 1993 7/1/93 | |
| City & State MIAMI, FLORIDA | | City & State | | 5. FEI Number 65-0421227 Applied For Not Applicable | |
| Zip 33129 | Country U.S. | Zip | Country | 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> <small>State Addition of Fee required for a Certificate of Status.</small> | |
| 8a. Capital Contributions as Shown on Record \$ 200,000 | | 8b. Amount of Capital Contributions in FLORIDA to date SAME \$ 200,000 | | 7. State or Country of Formation FLORIDA | |

FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, 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.
 Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

| | | | |
|---|--|--|--|
| 9. Name and Address of Current Registered Agent EDUARDO FERNANDEZ 1882 BRICKELL AVE. MIAMI, FL 33129 | | 10. If changed, new registered agent/office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code | |
|---|--|--|--|

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) *See Attached* 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) LA FRONTERA INVESTMENTS, INC. | Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1882 BRICKELL AVE. | City, State and Zip Code MIAMI, FL 33129 | 11a. Registration Document Number FEIN# 65-0419174 P93-41702 800002513908-2 -05/06/98-01100-016 *****535.00 *****535.00 |
|--|--|---|--|

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I 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 the report as required by chapter 620, Florida Statutes.

SIGNATURE *[Signature]* As President DATE 4/15/98
 Typed or Printed Name of General Partner Signing Form EDUARDO FERNANDEZ Telephone Number (305) 856-2750

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CR2E039 (12/97)

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Signature Page Only

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DOCUMENT #

1. Name of Limited Partnership

BYRONAIR APARTMENTS, LTD.

DO NOT WRITE IN THIS SPACE.

2. Mailing Address
1882 BRICKELL AVE.

Suite, Apt. #, etc.

3. Principal Office Address

Same as #2

Suite, Apt. #, etc.

4. Date Formed or Registered To Do Business in Florida

APRIL 1993

5. FEI Number

650421227

Applied For

Not Applicable

City & State
MIAMI, FLORIDA

City & State

Zip Country
33129 U.S.

Zip Country

6. CERTIFICATE OF STATUS DESIRED

7. State or Country of Formation FLORIDA

8a. Capital Contributions as Shown on Record
\$ 200,000

FEES: 1) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, 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.

8b. Amount of Capital Contributions in FLORIDA to date
SAME \$200,000

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

EDUARDO FERNANDEZ
1882 BRICKELL AVE.
MIAMI, FL 33129

10. If changed, new registered agent/office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

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, 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)

EDUARDO FERNANDEZ

DATE 4/25/98

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)

LA FRONTERA INVESTMENTS, INC.

Address of Each General Partner (Do NOT Use Post Office Box Numbers)

1882 BRICKELL AVE.

City, State and Zip Code

MIAMI, FL 33129

11a. Registration Document Number

FEIN: 65-0419174

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 regulated by chapter 620, Florida Statutes.

SIGNATURE

As President

DATE 4/15/98

Typed or Printed Name of General Partner Signing Form

EDUARDO FERNANDEZ

Telephone Number

(305) 856-2750

LA FRONTERA INVESTMENTS, INC.
General Partner

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TO: Brenda Tadlock
Supervisor.
Florida Department of State
Division of Corporations

FROM: Eduardo Fernandez
Byronair Apts. Ltd.

DATE: April 28, 1998

REF: Byronair Apts., Ltd.

Please be advised that I did not receive any information at the correct address.
Please make sure the correct address is in your files.

1882 Brickell Ave.
Miami, Fl. 33129

If you have any further questions, please contact me at 305-891-6647 daytime /
305-856-2750 evening.

Thank you .