

A93000000815

DOCUMENT # A93000000815

1. Name and Address of Partnership

BEACON DEVELOPMENT COMPANY, LTD.

99 SEP 20 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

2. Principal Office Address 3850 BIRD ROAD 2ND FLOOR MIAMI, FL 33146 USA	3. Principal Office Address 3850 BIRD ROAD Suite, Apt. #, etc. 2ND FLOOR City & State MIAMI, FL Zip 33146 Country USA	4. Date Formed or Registered To Do Business in Florida 8/6/93	5. FEI Number #65-0442369
		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	7. State or Country of Formation FL, USA

8a. Filing Fee(s) as shown in 8b. \$1,000	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.
8b. Additional Fee(s) for Contributions in FLORIDA \$1,000	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 BEACON DEVELOPMENT CORPORATION 3850 BIRD ROAD, 2ND FLOOR MIAMI, FL 33146	10. If changed, new registered agent's information REINSTATEMENT Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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 for the partnership and accept the obligations of section 620.192, Florida Statutes.

Signature of Registered Agent Accepting Appointment: *[Signature]* DATE: *[Date]*
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name of General Partner(s) BEACON DEVELOPMENT CORPORATION	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 901 PONCE DE LEON BLVD., SUITE# 501	City, State and Zip Code CORAL GABLES, FL 33134	11a. Registration Document Number # P93000043216
000002996560--S -09/24/99--01074--001 *****650.00 *****650.00			

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee.

SIGNATURE: *[Signature]* DATE: _____

Type of Florida Name of General Partner Signing Form: _____ Telephone Number: _____

CR2009 (12/98)