PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.								
LIMITED PARTNERSHIP REINSTATEMENT LIMITED FLORIDA DEPARTMENT OF STATE OF S					1-11-1-1			
DOCUMENT # A9400000373 1. Name of Limited Partnership					I #14CAMAJ#1	rlumba		П
MDN LANTANA, LTD.							1/2/	Ì
2. Principal Office Address 110 S.E. 4tl		3. Mailing Office Address 110 S.E. 4th Avenue			4. Date Formed or Registered To Do Susiness in Florida	03/23/199	94	
Suite, Apt. #, etc. Suite 101		Suite, Apt. #, etc. Suite 101			5. FEI Number Applied For 65-0476770 Not Applicable			
City & State Delray Beach	n, FL	City & State Delray Beach, FL			CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status			
Ζ φ 33483	Country USA	Z ip 33483	Country USA		78. Capital Contributions as shown on Record: \$1,534,500.00 7b. Amount of Capital Contributions in FLORIDA to date:			
8. Name and Address of Current Registered Agent					\$692,830.00			
Name DANIEL P. NAVILIO Street Address (P.O. Box Number is Not Acceptable) 110 S.E. 4th Avenue					FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, 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			
Suite, Apt. #, Etc.					with 1992 calendar year.			
Suite 101					Penalty Fee(s): \$500 penalty fee for <u>each year report form is definouent.</u> Note: If the amount entered in 7b is greater than amount entered in			
City Delray Beacl	n.	FL 33483			7e, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
9. 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, 1 am familiar with, and accept the obligations of section 620,192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)								
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.							S ENTITY	
10. Name(s) of General Partner(s)		Address of Each General Partner (Do NOT Use Post Office Box Numbers)			City, State and Zip Code		Registration ument Number	
NAVCO ENTERPRISES, INC.		110 S.E. 4th Avenue Suite 101		D∈	elray Beach, FL 33483	P94000021388		
					7000393 07/21/0401036-	7839 005 **	ァ 8166.25	
REINSTATEMENT 2004								
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.								1
11. I do hereby certify that the information supplies with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I release the Division of Corporations from any liability of non-perinpliands with Section 119.07(3)(i) 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 appurate and that my signature shall have the same legal effects as if made under eath. 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. 1								
SIGNATURE Land P. Vlavel DATE 1-15-2004								

DANIEL P. NAVILIO

Typed or Printed Name of General Partner Signing Form

561-364-9452

_ Telephone Number _