1. Entity Name  RAHN BAHIA MAR, LTD.  Principal Place of Business  801 SEABREEZE BLVD. FT. LAUDERDALE FL 33316  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Country  D2 MAY  SECRET  TALL AH/  SUITE, Apt. #, etc.  City & State  City & State  City & State  Tall AH/  SECRET  TALL	f Status Desired Status Desired Not Applicable Fee Required
Principal Place of Business  801 SEABREEZE BLVD. FT. LAUDERDALE FL 33316  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & State  Country  Country  TALL A.H.  SECRET TALL A.H.  SECRET TALL A.H.  P.O. BOX 5025 CORPORATE OFFICE BOCA RATON FL 33431  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  A. FEI Number  T. Name and A.  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number)	DUE BY MAY 1, 2002  65-0485440  Applied For Not Applicable  f Status Desired  \$8.75 Additional Fee Required
Principal Place of Business  801 SEABREEZE BLVD. FT. LAUDERDALE FL 33316  P.O. BOX 5025 CORPORATE OFFICE BOCA RATON FL 33431  2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  TAIL AHA  AMERICAN INFORMATION SERVICES, INC.	DUE BY MAY 1, 2002  65-0485440  Applied For Not Applicable  \$8.75 Additional Fee Required
801 SEABREEZE BLVD. FT. LAUDERDALE FL 33316  P.O. BOX 5025 CORPORATE OFFICE BOCA RATON FL 33431  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  4. FEI Number  Zip  Country  5. Certificate of Name and Address of Current Registered Agent  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number)	DUE BY MAY 1, 2002  65-0485440  Applied For Not Applicable  \$8.75 Additional Fee Required
BOCA RATON FL 33431  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Tip  Country  Tip  Country  Tourier	DUE BY MAY 1, 2002  65-0485440  Applied For Not Applicable  \$8.75 Additional Fee Required
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  5. Certificate o  6. Name and Address of Current Registered Agent  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number	DUE BY MAY 1, 2002  65-0485440  Applied For Not Applicable  \$8.75 Additional Fee Required
Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Zip  Country  5. Certificate o  6. Name and Address of Current Registered Agent  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number	65-0485440 Applied For Not Applicable  status Desired Status Desired Fee Required
City & State  City & State  City & State  City & State  4. FEI Number  Country  5. Certificate o  6. Name and Address of Current Registered Agent  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number	65-0485440 Applied For Not Applicable  status Desired Status Desired Fee Required
Zip Country Zip Country 5. Certificate o  6. Name and Address of Current Registered Agent Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number	f Status Desired
6. Name and Address of Current Registered Agent  Name  AMERICAN INFORMATION SERVICES, INC.  Street Address (P.O. Box Number	Fee Required
AMERICAN INFORMATION SERVICES, INC.  Name  Street Address (P.O. Box Number	
	Address of New Registered Agent
ONE S.E. IHIRD AVENUE, 27 ITI FLOOR	is Not Acceptable)
MIAMI FL 33131	
. City	FL Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.	DATE
9. Capital Contributions \$19.850,000.00 10. Amount of Capital Contributions \$19.850,000.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
as Shown on record.	CTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to the form of the f	ADDRESS CHANGES ONLY
DOCUMENT # L99000003878 STREET ADDRESS RAHN BAHIA, LLC	0/6/8
STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33432  CITY-ST-ZIP	CR2F003 (9/01)
DOCUMENT # STREET ADDRESS NAME	
STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # STREET ADDRESS STREET ADDRESS	0 <b>00055098930</b> -05/15/0201006020
STREET ADDRESS CITY-ST-ZIP	****526.25 ****526.25
DOCUMENT # STREET ADDRESS NAME	
STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # STREET ADDRESS NAME	·
STREFT ADDRESS CITY_ST-ZIP CITY_ST-ZIP	
DOCUMENT / STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	
CITY-SI-ZIP	(i) Florida Statutes I further certify that the information
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes	; that I am a General Partner of the limited partnership or

SIGNATURE:

4/25/02 Date

Daytime Phone #