Hall	2000	00	783		
REINSTATEMENT	PEURIDA DEPARTMENT OF STATE Sandra . Mcrtham		F 11 4 (3)		
FOR LIMITED PARTNERSHIP	Secretary DIVISION OF CO		SECRETARY OF S DIVISION OF CORPOR	RATIO NS	
DOCUMENT # A 94000000783		3	98 SEP 24 PM 1: 47		
SILVER BLUFF, LTD.			DO NOT WRITE	IN THIS S PACE.	
2. Mailing Address Sc. ROYCHORE CT	OC Sc. BAYSHORE CT. 3. Principal Office Address BAYSHORE C.T.		4. Date Formed or Registered 06/09/94		
Suito, Apt #, etc	Suite, Apl. #, etc.		5. FEI Number Applied For		
City & State M/AM/, FL	MIAMI, FL		6. SU 75 Additional Fee required		
33/33 Country USA	33/33 Country	ISA	7. State or Country of Formation	FL USA	
8a. Capital Contributions as Shown on Rocord 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. Amount of Capital Contributions in FLORIDA to Jale	2.) Supplemental rea(s): \$505.75 for gagg year gue this onlice, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for gach 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 soparate and				
9. Name and Address of Current Registered Agent		Name	10. If changed, new registered agent/office		
KUTTEROFF JAMES E,			Street Address (P.O. Box Number Is Not Acceptable)		
MIAMI, FL 33143		Suite, Apt. #, etc 800002549185—8			
		-09/25/9801078-001/ *****782. !ti_ ****/ 34/ 50			
10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or registered under the taws 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). Thereby accept the appointment of registered agent. It am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment). COMEN .: Ste Meroff. DATE 9/10/98					
A GENERAL PARTNER THAT IS A CORPORATION, LÍMÍTED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
11. Names of General Partner(s)	Address of Each General Pa (Do NOT Use Post Office Box N		City, State and Zip Code	11a. Registration Document Number	
SILVER BLUFF DevelopMENT COPP.	1660 So. B	AYSHOPE	MIAMI, FL	P94000043249	
Development Corp.	COURT		33133		
				(12/97	
				CH2E039	
			i	CR2	
111131/111/11/11/1993					
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 filling 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. If urther 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to except this report as required by entities 620. Forcide Statutes.					
SIGNATURE CEMES LATTERS DEV. CORF. 9/10/98					
Typod or Printed Name of General Partner Signing Form JAMES E. KUTTEROFF Telephone Number 859-8092					