(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

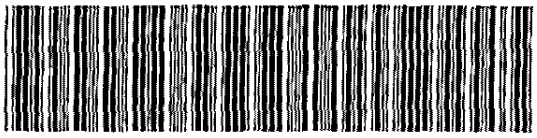
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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1ST NOTICE: DUE ON OR BEFORE DECEMBER 31, 1994

LIMITED PARTNERSHIP
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
95 MAR 30 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Limited Partnership

INTERSTATE BUSINESS PARK, LTD.
%GARCIA ENTERPREISES, INC.
7237 BRYAN DAIRY ROAD
LARGO FL 34647

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2a.

1a. DOCUMENT #
A94000000937

2. Enter Change of Mailing Address

City and State Zip Code

2a. Enter Principle Place of Business

City and State Zip Code

3. Date Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation	5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date
07/12/1994		FLORIDA	$100.00	$100.00

6. THE BASIC ANNUAL REPORT FILING FEE IS FIGURED AT THE RATE OF $7.00 PER THOUSAND ON THE ACTUAL CAPITAL CONTRIBUTION PLUS A SUPPLEMENTAL FEE OF $138.75 PURSUANT TO s.607.193, FLORIDA STATUTES, EFFECTIVE 7/1/92. THE FILING FEE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($437.50 + $138.75). For questions concerning filing fees, please call (904) 487-6058. Please submit your 1994 annual report with a check payable in U.S. funds through a U.S. bank to the Secretary of State.

7. Federal Employer Identification Number 59-3261731

FEI Number Applied For
FEI Number Not Applicable

$8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED X

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

MARTIN L. GARCIA, ESQ.
101 E. KENNEDY BLVD., SUITE 3700
TAMPA FL 33602
US

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 9

9. Name and Address of New Registered Agent

Name

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

City FL Zip Code

10. 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) _____ 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)	11a. Address of Each General Partner(s) (Do NOT Use Post Office Box Numbers)	11b. City and State	11c. Registration/Document Number
INTERSTATE BUSINESS PARK GENERAL PARTNER, LTD.	% GARCIA ENTERPRISES 7237 BRYAN DAIRY ROAD	LARGO FL 34647	A94000000908

TLS 3/30/95

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

12. I certify that the information indicated on this annual 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, trustee or other court authorized to prepare this report, as required by chapter 620, Florida Statutes.

SIGNATURE _____ DATE 3/28/95

Typed or Printed Name of General Partner Signing Form MARTIN L. GARCIA, VICE PRESIDENT OF INTERSTATE BUSINESS PARK, INC. GENERAL PRTNR OF INTERSTATE BUSINESS PARK GENERAL PARTNER, LTD. Telephone Number (813) 221-3900