FLORIDA DEPARTMENT OF STATE

## Sandra B. Mostham

Secretary of State

LIMITED PARTNERSHIP	MITED PARTNERSHIP DIVISION OF CORPORATIONS			-UN COARGARA			
DOCUMENT # A9400000		PH 1:51					
Mission Hills Properties	, LTD				E IN THIS SPACE.		
2. Mailing Address 5105 Mission Hius AVE	3. Principal Office Address 5105 MISSION	4. Date Fo	4. Date Formed or Registered To Do Business in Florida OCTOBER 1994				
Suite, Apt. #, etc	Suite, Apt # etc		5. FEI Nur	mber		Applied For	
City & State TAMPA FL	City & State TAMPA FL		<del></del>	65-05/5829 Not Applicable			
Zip Country	<del></del>	Country		6. S8 75 Additional Fee required for a Certificate of Status			
33617 U.S.A.	33617	U.S.A.			FL		
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.  Amount of Cepital Contributions in FLORIDA to date:  (12,442.00)  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.  Supplemental Fee(s): \$88.75 for each year teport 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 Re	<del></del>		10. 110	10. If changed, new registered agent/office			
MANUEL ELKIND		Name	178 611 SY/1				
5105 Mission HILLS AVE		Street Addr	Street Address (P.O. Box Number Is Not Acceptable)				
TAMPA, FL 33617		Suite, Apt. 4	Suite, Apt. #, etc				
			FL 71p Code				
10a. Pursuant to the provisions of sections 620-1051 and 63 for the purpose of changing its registered office or reglagont. Lam familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment).	istered agent, or both, in the State of F	med limited partne Florida. Such chan	ership organized or register ige was authorized by its ge	ed under the laws of the ineral partner(s). I hereb	State of Florida, subry accept the appoint	nits this statement ment of registered	
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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State at			egistration ment Number	
PALM LINKS CORPORATION	5105 MISSION HATS AVE		TAMPA , FL	71088	P940000	57708	
			3	000029 -06/057 ****14	4870 9801055 1.25 ***	31 004 *141.25	
1			31	00025 -06/05/ *****3	'88~-01055 <sub>'</sub>	3——1 005 ∗∗34.59	
				da			
Note: General partners MAY NOT b							
12. I do horeby 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 arnual 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 trustee empowered to execute this report as required by chapter \$20, Florida Statutes.

SIGNATWRE.

Typed or Printed Name of General Partner Signing Forms

Mission Hills Properties, LTD Manuel Elkind 5105 Mission Hills Ave. Tampa, FL 33617 (813) 988-8232

May 15, 1998

Florida Department of State Sandra B. Mortham Secretary of State, Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (850) 487-6051

Dear Madam

Enclosed please find the Application for Reinstatement for Limited Partnership for the following three partnerships along with the checks and explanation for the payments.

E and L Realty Associates, LTD #A9400000578 Mission Hills Properties, LTD #A94000001195 Parkland Partners, LTD #A95000000762

I personally apologize for your not having received the Limited Partnership Annual Reports for filing prior to April 10, 1998. There was some confusion as the reports were mailed to my attention at 3100 S. Ocean Blvd. #404N, Palm Beach, FL 33480, which was always the registered address. I have not resided at that address for a period in excess of 6 months, thus the forms did not come into my possession until too late, and I did think (wrongly perhaps) that our accountant had received them and that they were in his possession and attended to.

In addition, I do not recall ever receiving a 60 day notice of intent to revoke.

I am enclosing the checks for each partnership and do hope that they will meet with your consideration and understanding in this matter.

Please note that my address is now changed to:

Manuel Elkind 5105 Mission Hills Ave. Tampa, FL 33617 (813) 988-8232

Please find the explanation of payments on the following page. I thank you once again and hope that you will accept my explanation at this time.

Yours truly,

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Deborah A Luca
Notary Public, State of Florida
My Comm. Expires Oct 17, 2000
No. CC594359
Bonded Thru: Official Notary Service
1-(800) 723-0121

Huc

Manuel Elkind