PETER J. KANAVOS, JR. INVESTMENT, LTD.

APPROVEI AND

02 APR 17 PM 12: 04

Principal Place of Business  106 HANCOCK BRIDGE. UNIT D15-543  CAPE CORAL FL 33991  Mailing Address  106 HANCOCK BRIDGE. UNIT D15-543  CAPE CORAL FL 33991				<b>4</b> 3	SECRETARY OF STATE TAGLAHASSEE, FLORIDA		
2. Principal	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY MAY 1, 2002			
City & State		City & State		4. FEI Numbe		Applied For	
Zip	Country	Zip	Zip Country		5. Certificate of	of Status Desired	Not Applicable  \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		<u> </u>	7. Name and	Address of New Registere	
	0. 0.	-		Name		u Agent	
KANAVOS, PETER J JR 106 HANCOCK BRIDGE, UNITE D15-543 CAPE CORAL FL 33991			-	Street Address	s (P.O. Box Number	r is Not Acceptable)	
				City		F	Zip Code
	e named entity submits this statement for	or the purpose of changin	g its registered	office or regist	tered agent, or both	, in the State of Florida.	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	<u> </u>			·	·
9. Capital Co	ontributions \$3 000 000 00	10. Amount of C	apital Contribut	tions		11. MAKE CHECK PAYAB	
as shown on record. in FLORIDA to date				SEE REVERSE SIDE FOR FEE INFORMATION Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
	NOTE: General Partners MA	Y NOT be changed o	on the form; a	an amendme	STERED AND AC ent must be filed	TIVE WITH THIS OFFICE	CE.
12.	GENERAL PARTNER	RINFORMATION	13.			ADDRESS CHANGES OF	
DOCUMENT # NAME STREET ADDRESS	P94000076739 PJK INVESTMENT CO., INC. 18551 N. TAMIAMI TRAIL		STREET A	ADDRESS			
CITY-ST-ZIP	NORTH FORT MYERS FL 33903		CITY-ST-	- ZIP			
DOCUMENT # NAME		· · · · · ·	STREET A	ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-	-ZIP	3.78	-04/22/020 -04/22/020	<del>138-2</del> 01020015
DOCUMENT #			STREET A	DORESS		*****525.25	***************************************
STREET ADDRESS CITY-ST-ZIP			CITY-ST-	ZIP	e will all it	<del> </del>	
DOCUMENT / NAME			STREET AC	DDRESS	-		
STREET ADDRESS CITY-ST-ZIP			CITY-ST-	ZIP			
DOCUMENT 4 NAME	-		STREET AD	DDRESS			
STREET ADDRESS			CITY-ST-2	ZIP			
DOCUMENT #			STREET AD	DDRESS	***	<del></del>	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP