NUM: LAST: 100.00 TIFFANY SQUARE RENTAL APARTMENTS, LTD. NAME CHANGED: 02/07/0

PRINCIPAL: 300 NW 12TH AVENUE **ADDRESS**

RA NAME

RA ADDR

MIAMI, FL 33128 : MARTORANO, SAL

: 300 NW 12TH AVENUE

MIAMI, FL 33128 US

ANN REP : (1998) I 12/31/97 (1999) I 01/05/99 (2000) I 02/07/00

NAME CHG: 02/07/00

ADDR CHG: 02/07/00

1. MENU, 3. PARTNERS, 4. EVENTS

300003803693--6 -03/07/01--01023--001 ***1758.75 ***1750.00

ENTER SELECTION AND CR:

FF \$1750.00



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 31, 2001

TIFFANY SQUARE RENTAL APARTMENTS, LTD. 300 NW 12TH AVENUE MIAMI, FL 33128

SUBJECT: TIFFANY SQUARE RENTAL APARTMENTS, LTD. Ref. Number: A95000000609

We have received your document for TIFFANY SQUARE RENTAL APARTMENTS, LTD. and check(s) totaling \$535.00. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 901A00005715



SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of TIFFANU SQUARE RENTAL
APPARTMENTS, Ltd., a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.
The total amount of the capital contributions of the limited partners is: \$ 4214, 900.
This <u>26th</u> day of <u>Joynuary</u> , 19 2000.
FURTHER AFFIANT SAYETH NOT.
Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.
General Partner(s)
GMM-TIFFANY SQUARE INC. ES TO
Fees:
\$7 per \$1000, based on additional contributions Minimum \$ 52.50

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Maximum \$1750.00