

A95000000680

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STUART, FLORIDA 34995

STUART (407) 288-0048
PALM BEACH (407) 655-9071
TALLAHASSEE (904) 288-0049

TALLAHASSEE, FLORIDA

FILED
APR 24 AM 10:43

1000001464301
-04/25/95--01033--003
****437.50 ****437.50

April 18, 1995

Secretary of State
Division of Corporations
Bureau of Corporate Records
Post Office Box 6327
Tallahassee, Florida 32314

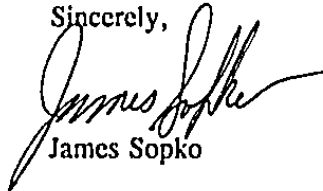
Re: IMB Holdings Limited

Gentlemen:

Enclosed is an original and one copy of the Certificate of Limited Partnership of IMB Holdings Limited, an Affidavit of Capital Contributions and a check in the amount of \$437.50 payable to the State of Florida representing a \$350.00 filing fee, \$52.50 for a certified copy of the Certificate of Limited Partnership and \$35.00 for the designation of Registered Agent. Kindly accept the enclosed for filing.

Please return a certified copy of the Certificate of Limited Partnership to the undersigned at your convenience. Thank you for your cooperation in this matter. If you have any questions, please feel free to call.

Sincerely,


James Sopko

JS/sla
Enclosures
cc: Mr. Ronald Haselton

5-1-95 a
CC

FF - \$140.00
RA - 35.00
CC - 52.50
perpaid \$210.00

CERTIFICATE OF LIMITED PARTNERSHIP

A9500000680

FILED
1995 APR 24 AM 10:43
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a Limited Partnership pursuant to the laws of the State of Florida, certify as follows:

1. Name of Limited Partnership

The name of the Limited Partnership is **IMB Holdings Limited.**

2. Office for Maintenance of Business Records

The address of the office at which the records of the Limited Partnership will be kept, as required by Section 620.106 of the Florida Statutes is **1768 Gulfstream Way, West Palm Beach, Florida 33411.**

3. Agent for Service of Process

The name and address of the Partnership's agent for service of process in Florida is **Ronald Haselton, 1768 Gulfstream Way, West Palm Beach, FL 33411.**

4. General Partners

The name and business address of the General Partner in the Limited Partnership is **IMB Holding Company located at 1768 Gulfstream Way, West Palm Beach, Florida 33411.**

5. Address of Partnership

The mailing address of the Limited Partnership is **1768 Gulfstream Way, West Palm Beach, Florida 33411.**

6. Date of Dissolution

The latest date in which the Limited Partnership is to dissolve is **December 31, 2023.**

7. Effective Date

This certificate will become effective, and the Limited Partnership will be formed, upon filing with the Secretary of State.

Dated: April 14, 1995

West Palm Beach, Florida

FILED
1995 APR 26 AM 10:43
TALLAHASSEE, FLORIDA

General Partner:
IMB Holdings Company

By: R. Haselton
Ronald Haselton, President

ACCEPTANCE OF AGENT FOR SERVICE OF PROCESS

Having been named to accept service of process for the above-stated limited partnership, IMB HOLDINGS LIMITED, I hereby agree to act in that capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

DATED this 14 day of April, 1995.

R. Haselton
Ronald Haselton
Agent

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, who is the President of IMB HOLDINGS COMPANY, a Florida corporation, the sole general partner of IMB HOLDINGS LIMITED, a Florida Limited Partnership (the "Partnership"), declares that the capital contributions of all the Limited Partners in the Partnership are as follows:

1. The original Limited Partners have made a capital contribution in the following amounts:

<u>Name of Limited Partner</u>	<u>Amount of Contribution</u>
Wallace M. Haselton	\$ 20,000.00

2. It is anticipated that additional contributions by Limited Partners will be made in the future, although it is unknown at this time what the amount of their contribution will be.

Dated: April 14, 1995
Stuart, Florida

General Partner
IMB HOLDINGS COMPANY
a Florida Corporation

By: Ronald Haselton
Ronald Haselton, President

STATE OF FLORIDA
COUNTY OF PALM BEACH

On this 14 day of April, 1995, before me, a Notary Public, duly authorized in the State and County named above to take acknowledgments, personally appeared RONALD HASELTON, the President of IMB HOLDINGS COMPANY, a Florida Corporation, the General Partner of IMB HOLDINGS LIMITED, a Florida Limited Partnership, who is [] personally known to me or [] who provided his _____ as identification, and who is the person whose name is subscribed to the within instrument and who acknowledged that he executed the same on behalf of the General Partner of the Partnership.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

(NOTARY SEAL)

Barbara Davis Barbara Davis
[Print Name]

I am a Notary Public of the State of Florida
having a commission number of CC 11285-4
and my commission expires: _____

A95000000680

PURSUANT to the provisions of Section 215.26, Florida Statutes, I hereby apply for a refund and request that a State Warrant be drawn in favor of:

Name: James Sopko, Esquire
Address: Post Office Box 2421
Stuart, FL 34995
Amount: \$437.50

which represents moneys I paid into the State Treasury subject to refund, and to substantiate such claim the following facts are submitted:

Reason for Claim: Overpayment of filing fees

IMB HOLDINGS LIMITED #A95000000680

Section: Limited Partnership A. Watson Date Processed: 05/01/95

CERTIFIED TRUE AND CORRECT this 31st day of July

James Sopko
Signature

(FOR AGENCY USE ONLY)

(1) Agency recommends denial of above claim based on the following facts, including statutory authority for collection: _____

(2) Agency recommends approval of above claim and submits the following information to substantiate such claim.
The amount recommended \$ \$210.00

The amount requested above was originally deposited into the State Treasury. State Treasurer's Receipt # 01093-003, Dated 04/25/95.

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE
4 5 2 0 2 1 3 0 0 0 1 4 5 3 0 0 0 0 0 0 0 0 0 0 0 1 0 0 0 0

Statutory Authority for Collection 607.0122

It is requested that payment be made from:

NAME OF ACCOUNT:

SAMAS ACCOUNT CODE
4 5 2 0 2 1 3 0 0 0 1 4 5 3 0 0 0 0 0 0 0 0 2 2 0 0 0 0 0 0

Certified True and Correct this _____ day of _____, 19____.

Dept. of State, Div. of Corporations
Agency

Authorized Signature and Title

Section 215.26 states, in part: "Application for refund as provided by this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is interpreted as meaning three years from the date of payment into the State Treasury.

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Candice Moultrie
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 JAN 11 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000680

IMB HOLDINGS LIMITED

96-AR

CM

Mailing Address

1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411

Principal Office Address

1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411

If above information is incorrect in any way, file through this correct information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
03/24/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record
\$20,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. Filing Number

N.A.

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$6.75 Additional Fee required
for a Certificate of Status

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5b blank, with a minimum filing fee of \$70.50 and a maximum of \$437.50
2) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

HASELTON, RONALD
1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411

10. If changed, new Registered Agent/Office

Name

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

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registrant/
Document Number

IMB HOLDING COMPANY

1768 GULFSTREAM WAY

WEST PALM BEACH FL 33

L23377

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 filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further 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 oath. 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 620, Florida Statutes.

SIGNATURE

IMB Holdings Company
by R. W. Haselton

DATE

12-15/95

Typed or Printed Name of General Partner Signing Form

R. W. HASELTON

Telephone Number

407-278-6463

CR2003 (6/95)