

Charter Number Only

5-19-95 **A95000000775**

Silver & Silver  
Requestor's Name  
150 SE 2 AVE #500  
Address  
Miami, FL 33131  
City State ZIP Phone

374-4858

CORPORATION(S) NAME


APRIL REALTY, LTD.

VERIFICATION ONLY

FILED  
MAY 22 11:50 AM '95  
FILED  
MAY 22 11:50 AM '95

RECEIVED  
MAY 22 11:09 AM '95  
DIVISION OF CORPORATIONS

600001498010  
-05/24/95--01042--018  
\*\*\*1785.00 \*\*\*1785.00

 **EMPIRE** Toll Free: 1-800-432-3028

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out

Name	
Availability	<u>Mr</u>
Document	
Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

5/22/95

B/K  
5/19/95

G. TAX \_\_\_\_\_  
 FILING \_\_\_\_\_ 17.50  
 A. AGENT FEE \_\_\_\_\_ 25  
 G. COPY \_\_\_\_\_  
 FDU \_\_\_\_\_ 1785  
 V. FEE \_\_\_\_\_  
 SERVICE FEE \_\_\_\_\_

CERTIFICATE OF LIMITED PARTNERSHIP  
OF

1. April Realty Limited  
(Name of Limited Partnership; must contain a suffix such as "Limited",  
"Ltd.", or "Limited Partnership")

2. 8603 S. Dixie Highway, Suite 410, Miami, Florida 33143  
(The Business Address of Limited Partnership)

3. Robert Sherry  
(Name of Registered Agent for Service of Process)

4. 8603 S. Dixie Highway, Suite 410, Miami, Florida 33143  
(Florida Street Address for Registered Agent)

5. See General Partner Signature  
(Registered Agent must sign here to accept designation as Registered Agent for  
Service of Process.)

6. 8603 S. Dixie Highway, Suite 410, Miami, Florida 33143  
(The Mailing Address of the Limited Partnership.)

7. The latest date upon which the Limited Partnership is to be dissolved is 2025.

8. NAME OF GENERAL PARTNER(S)

SPECIFIC ADDRESS

Robert Sherry  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8603 S. Dixie Highway, Suite 410, Miami, FL  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed this 19th day of May, 1995.  
Signature of all general partners:

Robert Stey  
General Partner / Registered Agent

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

FILED  
1995 MAY 22 11 09 AM

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned constituting all of the general partners of  
April Realty, Ltd., a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$ 693,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 693,000.00.

This 19th day of May, 19 95.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

Robert Skrey  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

RECEIVED  
MAY 19 1995  
00

**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  
Sandra Mathias  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

95 DEC 14 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

1. Name of Limited Partnership

APRIL REALTY LIMITED

1a. DOCUMENT #  
A95000000775

96-AR

CM

2. New Mailing Address, if Applicable

Name, Apt. # etc.

City, State & Zip

2a. New Principal Office, if Applicable  
7000011567307  
-12/21/95--01006--011

Name, Apt. # etc.

\*\*\*\*138.75 \*\*\*\*138.75

City, State & Zip

Mailing Address

8003 S. DIXIE HIGHWAY, SUITE 410  
MIAMI FL 33143

Principal Office Address

8003 S. DIXIE HIGHWAY, SUITE 410  
MIAMI FL 33143

If above addresses are incorrect in any way, file through the incorrect information and enter correct address in Block 2 and/or 2a.

3. Date Formed or Registered to Do Business in  
FLORIDA 05/22/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown on Record  
\$693,000.00

5b. Amount of Capital Contributions in FLORIDA to date

6. FIC Number

Applied Fee

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$3.75 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 5b or 5a if 5b blank, with a minimum filing fee of \$32.50 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

SHERRY, ROBERT  
8603 S. DIXIE HIGHWAY, SUITE 410  
MIAMI FL 33143

10. If changed, new Registered Agent Office

Name

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

State, Apt. # etc.

City

7000011567307  
-12/21/95--01006--012

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, is hereby changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s) and 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)

SHERRY, ROBERT

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

8603 S. DIXIE HIGHWAY

11b. City, State & Zip Code

MIAMI FL 33143

11c. Registration/Document Number

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, partner or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

*Robert Sherry*

DATE

11/10/95

Typed or Printed Name of General Partner Signing Form

ROBERT SHERRY

Telephone Number

305-665-1500

CR2E003 (6/95)