

APPLICATION FOR REINSTATEMENT OF LIMITED PARTNERSHIP		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAR 27 PM 3:00 DO NOT WRITE IN THIS SPACE	
DOCUMENT # A9500000845 1. Name of Limited Partnership BEACH HORIZON ASSOCIATES, LTD.		2. Mailing Address 1650 East Sunrise Boulevard Suite Apt. #, etc.		3. Principal Office Address 1650 East Broward Boulevard Suite Apt. #, etc.	
City & State Ft. Lauderdale, FL Zip 33304 Country USA		City & State Ft. Lauderdale, FL Zip 33304 Country USA		4. Date Formed or Registered To Do Business in Florida JUNE 6, 1995 5. FEI Number 65-0663013 Applied For Not Applicable	
6a. Capital Contributions as Shown on Record 300.00 6b. Amount of Capital Contributions in FLORIDA to date 300.00		FEES: 1. Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 6b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2. Supplemental Fee(s): \$109.75 for each year due this office, beginning with 1992 calendar year. 3. Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 6b is greater than amount entered in 6a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.		6. CERTIFICATE OF STATUS DESIRED ☒ NOTE: Additional Fee required for Certificate of Status. 7. State or Country of Formation FLORIDA, USA	
9. Name and Address of Current Registered Agent JOSEPH M. BALOCCO, ESQ. 1323 SE THIRD AVENUE FORT LAUDERDALE, FL 33316		10. If changed, new registered agent/office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
10a. Pursuant to the provisions of sections 620.1051 and 620.192, 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 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____					
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) OCTAGON DEVELOPMENT AND DESIGN, INC. PRAWATY 1000.00 AR 105.00 SUPP 177.50 CUS 8.75 \$1,291.25		Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1650 East Sunrise Boulevard		City, State and Zip Code Ft. Lauderdale, FL 33304	
11a. Registration Document Number P95000048057		3000002475553--7 -04/01/98--01073--019 ***1291.25 ***1291.25 REINSTATEMENT 1997-1998 			
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)(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 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 _____ Typed or Printed Name of General Partner Signing Form: JOHN O. ULBRICH, President		DATE 3/25/98 Telephone Number (954) 463-2554			