

A45000001134

BRONX ACCESS, INC.
164...
ALL HASSEE, F... 23...
(904) 22-2...66

FILED
JUL 25 10 12:10
DIVISION OF CORPORATIONS

(Requester's Name) Alfred
(Address) _____
(City, State, Zip) _____ (Phone #) _____

OFFICE USE ONLY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 25 PM 2:02

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. EL NAZARENO Partnership, LTD
(Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #) **400001550784**
3. _____ (Corporation Name) (Document #) **88/01/95 01677--001**
4. _____ (Corporation Name) (Document #) *****1837.50 ***1837.50**

- ☒ Walk in ☒ Pick up time 7:25 1:00
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certified Copy
☐ Certificate of Status

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION | |
|-------------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input checked="" type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

FILING
R. AGENT FEE 1250.00
J. COPY 35.00
TOTAL 1285.00
BANK 11837.50
BALANCE DUE
CHIND

7/25/95

Examiner's Initials DK

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

**EL NAZARENO PARTNERSHIP, LTD.
A Florida Limited Partnership**

THE UNDERSIGNED, constituting the General Partner of EL NAZARENO PARTNERSHIP, LTD., a Florida limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. The name of the Partnership is EL NAZARENO PARTNERSHIP, LTD.

2. The address of the office of the Partnership is:

c/o Delia Iglesias
289 N.W. 63rd Court
Miami, FL 33126

3. The name and address of the agent for the service of process on the Partnership is:

KTG&S REGISTERED AGENT CORPORATION
100 S.E. 2nd Street
#2800
Miami, Florida 33131

4. The name and business address of the General Partner is as follows:

El Nazareno Corp.
c/o Delia Iglesias
289 N.W. 63rd Court
Miami, FL 33126

5. The mailing address of the Partnership is:

c/o Delia Iglesias
289 N.W. 63rd Court
Miami, FL 33126

6. The latest date upon which the Partnership will dissolve is December 31, 2045.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership of EL NAZARENO PARTNERSHIP, LTD. this 24th day of July, 1995.

GENERAL PARTNER:

EL NAZARENO CORP.

By: Delia Iglesias
Delia Iglesias, President

FILED
STATE
CORPORATIONS
DIVISION
JUL 25 1995
2:02 PM

895000056956

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for EL NAZARENO PARTNERSHIP, LTD., a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, agree to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:

KTG&S REGISTERED AGENT CORPORATION

By:


Marc H. Auerbach, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 25 PM 2:03

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 25 PM 2:03

BEFORE ME, the undersigned authority, personally appeared Delia Iglesias, President of El Nazareno Corp., the General Partner of El Nazareno Partnership, Ltd., a Florida limited partnership, herein referred to as the "Partnership", who, upon being duly sworn, certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$99.00

2. The amount of capital contributions anticipated to be contributed by additional Limited Partners is as follows:

\$4,000,000.00

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

FURTHER AFFIANT SAYETH NOT.

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

GENERAL PARTNER:

EL NAZARENO CORP.

Dated: July 24, 1995

By: Delia Iglesias
Delia Iglesias, President

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 Mayhew
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 DEC 29 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership:

1a. DOCUMENT #
A95000001134

EL NAZARENO PARTNERSHIP, LTD.

Mailing Address

C/O DELIA KOLENAS
300 N.W. 63RD COURT
MIAMI FL 33126

Principal Office Address

C/O DELIA KOLENAS
300 N.W. 63RD COURT
MIAMI FL 33126

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

3. Date Formed or Registered to Do Business in

FLORIDA
07/25/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record

\$4,000,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

65-0545165

☒ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5a blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$132.75 (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 \$576.5 (\$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

KTO&S REGISTERED AGENT CORPORATION
100 S.E. 2ND STREET, #2800
MIAMI FL 33131

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

Zip Code

FL

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

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

EL NAZARENO CORP.

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

200 N.W. 63RD COURT

11b. City, State & Zip Code

MIAMI FL 33126

11c. Registration
Document Number

PR0000000000

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 520, Florida Statutes.

SIGNATURE

El NAZARENO Partnership, Delia Iolas
Delia Iolas
President of Partnership

DATE

Dec 19-1995

Typed or Printed Name of General Partner Signing Form

Delia Iolas

Telephone Number

(305) 267-4852 (h)
347665 (w)

CR2E003 (6/95)