STAPLE CHECK HERE

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DOCUMENT # A9500001430  1. Entity Name COLONY SOUTH ASSOCIATES, LTD.					031	FILED FEB-7 AM 9:	36	₽.
Principal Place 9355 S.W. 77TH MIAMI FL 33156	1 AVENUE	Mailing Address 9355 S.W. 77TH AVENUE MIAMI FL 33156			SECRETARY OF STATE TATE AHASSEE, FLORIDA			
2. Principal Pi	ace of Business	3. Mailing Address	3. Mailing Address			IN 18781 ANIIL ABIN BRIN BRIN	1611) 20101 HOUSE SIGN HALL CO.	" <del>-                                    </del>
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 2003  A FEL Number of 0640006  Applied For			
City &/State	9	City & State			Not Applicable			_
Zip	Country	Zip			5. Certificate of Status Desired S8.75 Additional Fee Required  7. Name and Address of New Registered Agent			_
	6. Name and Address of Curren	t Registered Agent			7. Name and A	adress of New Registr	V Agent	_
				Name	Apts 2	Steven S	here	
CORPOR/	ATION SERVICE COMPANY			Charact Orderson (	P.O. Poy Number	is Not Acceptable)		
	S STREET			Street Address		A Cochiano		
			73//	<u> </u>	**			
) TALLAHA:	SSEE FE 32301					· ·		
				City			FL 722006	
				MAM	11-11		t are familiar with and acce	ant
R The above	named entity submits this statement	for the purpose of changing its	s register	ed office or register	red ågent, or both,	, in the State of Florida.	am ramiliar with, and acce	, j
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE — DATE Signature, typed or pripted partie of registered agent and post applicable.								
11 MAKE CHECK PAYABLE TO FL, DEPT. OF STATE								
in EL OBIDA to date 22/ 000.								
as Shown on record.  A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.								
NOTE: General Partners MAY NOT be changed on the form, an amendment most be made to the space changes only								
12.	GENERAL PARTN	13.	<u> </u>	<del></del>	Application of the second		3	
DOCUMENT #	DOCUMENT # P95000061411							Ş
NAME SHERE INVESTMENTS, INC.				-				7
STREET ADDRESS	STREET ADDRESS 3150 SOUTH MOORING WAY			(-ST-ZIP				\ <u>}</u>
CITY-ST-ZIP	CITY-ST-ZIP COCONUT GROVE FL 33133							(0///10
DOCUMENT # P95000061491			STR	EET ADDRESS				1,6
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STREET ADDRESS	EET ADDRESS 9355 S.W. 77TH AVE.			CITY-ST-ZIP 900011979529 02/07/02-00027014 **526, 25				
CITY-ST-ZIP	-ST-ZIP MIAMI FL 33156			- <del></del> -	<del> 02/07/</del>	<del>190113401</del>	<u> 4 - **269+60,</u>	
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STREET ADDRESS	5 <b> </b>		СП	Y-ST-ZIP				]
L CITY-ST-ZIP	<del> </del>	<u> </u>				<del> </del>		
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NAME	<b>,</b>			<del> </del>				
STREET ADDRESS			CI	ry-st-zip		2115		
CITY-ST-ZIP			<del></del>		M THOMAS			
- DOCUMENT#			ST	REET ADDRESS	•	##* . # # **	•	
NAME STREET ADDRES			ı	<del> </del>	<u> </u>	E 11		
				TY-ST-ZIP				
CITY-ST-ZIP	<u> </u>		for the ex	comption stated in	Section 119 07/3\/	i). Florida Statutes. I fui	rther certify that the informat	ion
14. I hereby certify that the information supplied with his bing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and training signature sharp have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute his report as required by Chapter 620, Florida Statutes								
indicated on this report is true and accorded and the receiver or trustee empowered to execute this reputited by Chapter 620, Florida Statutes								
(7/4/07 305-2709430								
SIGNATURE: Date Daytime Phone #								