

A95000001583

3/03/97 CORPORATE DATA RECORD SCREEN 35 PM
NUM: A95000001583 ST: FL AC: 10/FL: EP
ACT CONT: 1,000.00 FEI#: APPLIED FOR
NAME : BENOIT FAMILY LIMITED PARTNERSHIP
PRINCIPAL: 4000 NE 29 AVE.
ADDRESS FORT LAUDERDALE, FL 33308
RA NAME : LIVERNOIS, MELBOURNE J
RA ADDR : 4000 NE 29TH AVE
FT LAUDERDALE, FL 33308 US
ANN REP :

(1996) I 01/02/96

1. MENU, 3. PARTNERS

ENTER SELECTION AND CR:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAR 28 AM 8:42

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Name	983-28
Availability	
Document	98
Examiner	
Updater	98
Updater	98
Verifier	
Acknowledgment	98
W. P. Verifier	98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 9, 1997

BENOIT FAMILY LIMITED PARTNERSHIP
4000 NE 29 AVE.
FORT LAUDERDALE, FL 33308

SUBJECT: BENOIT FAMILY LIMITED PARTNERSHIP
Ref. Number: A95000001583

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Chapter 620, Florida Statutes, requires a supplemental affidavit to be filed pursuant to section 620.108 or 620.169, Florida Statutes, any time the actual contributions of the limited partners exceed the anticipated amount of capital contributions on file with this office.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6051.

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DIVISION OF CORPORATIONS
97 MAR 28 AM 8:42



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 13, 1997

BENOIT FAMILY LIMITED PARTNERSHIP
4000 NE 29 AVE.
FORT LAUDERDALE, FL 33308

SUBJECT: BENOIT FAMILY LIMITED PARTNERSHIP
Ref. Number: A95000001583

We have received your document for BENOIT FAMILY LIMITED PARTNERSHIP and check(s) totaling \$367.16. However, your check(s) and document are being returned for the following:

The fee to file the supplemental affidavit is ~~\$221.41~~ and the fee to file the annual report is ~~\$332.16~~. The total fee due for both filings is ~~\$553.57~~. Please return the supplemental affidavit and the annual report together with the appropriate fee.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6051.

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 3, 1997

BENOIT FAMILY LIMITED PARTNERSHIP
4000 NE 29 AVE.
FORT LAUDERDALE, FL 33308

SUBJECT: BENOIT FAMILY LIMITED PARTNERSHIP
Ref. Number: A95000001583

We have received your document for BENOIT FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$553.57. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file the supplemental affidavit is \$228.41 and the fee to file the annual report is \$332.16. The total fee due for both filings is ~~\$560.57~~. Please return the supplemental affidavit and the annual report together with the appropriate fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 597A00010901

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DIVISION OF CORPORATIONS
97 MAR 28 AM 8:42



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of BENDT FAMILY LIMITED PARTNERSHIP, a

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 32630.31.

This 29 day of JANUARY, 19 97.

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

[Signature]
[Signature]

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)

INHSE20(3/95)

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