

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF STAT Secretary of State division of corporations	2004 JAN	FILED 1-© AM 8: 06	
DOCUMENT # $A9600000/067$ 1. Name of Limited Partnership		DIVIJION C TALLAH	DIVIJION OF CORPORATIONS TALLAHASSEE, FLORIDA	
Comfort Suites Maingate, Ltd.		8000260 01/06/0401003-	37208 -011 **2052.50	
2. Principal Office Address 7836 W. Irlo Bronson	3. Mailing Office Address Hwysame-	4. Date Formed or Registered To Do Business in Florida	6-06-96	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number 59~3380460	Applied For Not Applicable	
City & State	City & State	6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
Kissimmee, FL Zip Country 34747 USA	Zip Country	5,300,000	7a. Capital Contributions as shown on Record: 5,300,000	
8. Name and Address of Current Registered Agent			7b. Amount of Capital Contributions in FLORIDA to date: 5,300,000	
Name George Chen Street Address (P.O. Box Number is Not Acceptable) C/O International American Resorts, Inc		1.) Filing Fee(s): Computed at a rate of in 7b, with a minimum filing fee of \$5 for <u>each year due</u> this office.	FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.	
Suite, Apt. #, Etc. 7836 W Irlo Bronson Hwy City Kissimmee State State State State State State State Adaptopriate filling fee. With 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee fe Note: If the amount entered in 7b 7a, a supplemental affidavit must be and appropriate filling fee.			each year report form is delinquent. greater than amount entered in	
9. 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, anguaccept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) DATE DATE				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number	
International America Resorts, Inc.	n 7836 W. Irlo Bronson Hwy.	Kissimmee, FL. 34747	P93000038238	
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		nstatement.	2002-03	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
11. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 .	Che	Date	12/24/03	