


APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 JUL 26 PM 2:45	
DOCUMENT # A96000001381					
1. Name of Limited Partnership THE RHODES FAMILY LIMITED PARTNERSHIP				DO NOT WRITE IN THIS SPACE	
2. Mailing Address 3451 NW 212th ST.		3. Principal Office Address 24 NW 212TH STREET		4. Date Formed or Registered To Do Business in Florida 7/24/96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0750433	
City & State MIAMI FLORIDA 33056		City & State MIAMI FLORIDA 33056		Applied For Not Applicable	
Zip 33056	Country USA	Zip 33056	Country USA	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
				7. State or Country of Formation FLORIDA	
8a. Capital Contributions as Shown on Record \$500,000.00		FEES: 1.) Filing Fee(s) Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$88.75 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 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
8b. Amount of Capital Contributions in FLORIDA to date					
9. Name and Address of Current Registered Agent JOHN S. BOHATCH GUTTENMACHER & BOHATCH, P.A. 2600 DOUGLAS ROAD, PENTHOUSE 8 CORAL GABLES, FLORIDA 33134				10. If changed, new registered agent/office Name Street Address (P.O. Box Number is Not acceptable) 100002948631--2 Suite, Apt. #, etc. -08/03/99--01030--002 *****526.25 *****526.25 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)		Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State and Zip Code	
11a. Registration Document Number					
RHODES, MARJORIE		3451 N.W. 212th ST.		MIAMI FLORIDA 33056	
A96000001381		100002948631--2 -08/03/99--01030--003 *****500.00 *****500.00			
REINSTATEMENT <i>500.00 reinstatement fee</i> <i>7/30/99</i>					
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 <i>Marjorie Rhodes</i> <i>POA</i> DATE <i>7/19/99</i>					
Typed or Printed Name of General Partner Signing Form MARJORIE RHODES Telephone Number _____					

CR2E039 (12/98)

GUTTENMACHER & BOHATCH, P.A.

ATTORNEYS AT LAW

JOHN S. BOHATCH
EDWARD P. GUTTENMACHER

SAIDY M. BARINAGA-BURCH
ROXANA I. NASCO

PRACTICE LIMITED TO
TAX CONTROVERSIES &
TAX & ESTATE PLANNING

PENTHOUSE EIGHT
DOUGLAS CENTRE
2600 DOUGLAS ROAD
CORAL GABLES, FLORIDA 33134

TELEPHONE (305) 442-4911
TELEFAX (305) 442-0911

KEY WEST OFFICE

2647 GULFVIEW DRIVE
KEY WEST, FLORIDA 33040

TELEPHONE (305) 294-1521
TELEFAX (305) 292-4016

July 22, 1999

Division of Corporations
Attn: Partnership Section
409 East Gaines Street
Tallahassee, Florida 32399

Re: THE RHODES FAMILY LIMITED PARTNERSHIP

To Whom It May Concern:

Enclosed please find the Application for Reinstatement for Limited Partnership for the above referenced limited partnership along a check for \$1,026.25 for reinstatement fee.

Should you have any questions, please feel free to call me.

Sincerely,

GUTTENMACHER & BOHATCH, P.A.



Nancy O. Alvarez
Legal Assistant to John S. Bohatch

noa
Enclosure