APPLICATION FOR REINSTATEMENT FOR



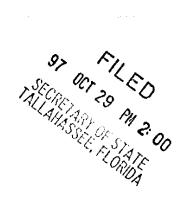
FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP

DOCUMENT # A96000001565

1. Name of Limited Partnership

GMP HOLDINGS, LTD.



			DO NOT WRITE IN THIS SPACE		
2. Mailing Address N.W. 87th A	ve. 3750 N.W.	87th Ave.	4. Date Formed or Registered To Do Business in Florida	8/21/96	
Suite, Apt. #, etc. Suite 250	Suite, Apt #, etc. Suite 250		5. FEI Number 65-0744101	Applied For	
City & SMiami, FL 33178	^c Miami, FL	33178	6.	Not Applicable S8.75 Additional Fee required	
Zip Country	7(p	Country	CERTIFICATE OF STATUS DESIR	for a Certificate of Status	
33178 USA	33178	USA	7. State or Country of Formation		
8a. Capital Contributions as Shown on Record \$514,500.00	\$437.50, fo	r each year due this office.	or \$1,000 on amount entered in 85, with a minimum filing fee of \$52.50 and a maximum of ear due this office, beginning with 1992 calendar year.		
8b. Amount of Capital Contributions in FLORIDA to date: \$514,500.00 3) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit appropriate filing fee.					
9. Name and Address of Current Registered Agent			10, If changed, new registered agent/office		
CORPCO, INC.			Name		
2699 South Bayshore Dr. 7th Floor Miami, FL 33133		Street Address (F	Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		
		City	City FL Zip Code		
10a. Pursuant to the provisions of socions 620 1051 and 620 192, Florida Statules, 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 620.09. Florida Statules. CORPCO, INC. SIGNATURE (Registered Agent Accepting Appointment). By: 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 Pariner(s)	Address of Each C (Do NOT Use Post Off		City, State and Zip Code	11a. Registration Document Number:	
KB-GALLOWAY CORP	. 3750 N.W.	87th Ave. M	iami, FL 33178	P96000069466	
			2000023 -10/31/ ***163	351420 9701061019 5.00 ***1582.50	
: d8 7.	37.50 103.75			<u>900</u>	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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. Flurther 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 eath. I further certify that I am a General Partner of the limited partnership, receiver of empowered to execute this report as required by chapter 620, Florida Statutes KB-GALLOWAY CORP.

SIGNATURE _By:_ Typed or Printed Name of General Partner Signing Form

MICHAEL KATZ, Director (305) 591-1121