DOCUMENT # A9400001586

Typed or Printed Name of General Partner Signing Form

SECRETARY OF STATE DIVISION OF CORPORATIONS 97 MAY 12 PM 12: 07

1. Namo of Limited Partnership	•		}		
LOS RANCHUS OF SO	UTH DADE	LTO.			
			DO NOT WRITE	DO NOT WRITE IN THIS SPACE	
2. Mailing Address 1405 5W 107TH AUE	3, Principal Office Address		4. Date Formed or Registered To Do Business In Florida	4. Date Formed of Registered To Do Business In Florida 08 -26-96	
Suite Apt *, etc 301-8	Suite, Apt. #, etc.		5. FEI Number	5. FEI Number Applied For Not Applied For	
MIAMI FLORIDA	City & State		6.	Not Applicable	
33171 USA	Žip	Country	7 State or Country of Formation	ke a Certificate of Status	
8a. Capital Contributions as Shown on Record	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 \$4.37.50, for each year due this office. 2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year. 3.) Penetity Fee(s): \$500 penetity 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				
100,000.					
8b. Amount of Capital Contributions in FLORIDA to tiple					
7 50,000.	appropriate filing	l es .	40 Maharad 2000 and 2	and the	
9. Name and Address of Current R		Name	10. If changed, new registered a	gentrorrice	
MARTIN, PEORO A. ESQ. CLO GREENBERG TRAVERGE FAL Street Address (F.O. Box Number is Nor Accept 15/15/97-01101-008					
1221 BRICKELL AUE			Suite, Apt. #, etc. ####953.75 ####953.75		
MIAMI, FLORIDA.		City		FL Zip Code	
10a. Pursuant to the provisions of sections 620 1051 and 6 for the purpose of changing its registered office or rec	20 192, Florida Statutes, the at				
agent I am familiar with, and accept the obligations of			in the series from the following the series of the series	accept the appointment or regional co	
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 (Do NOT Use Post O	General Partner	City, State and Zip Code	11a. Registration Document Number	
LOS RANCHOS OF SOUTH	1405 SW	OTTH ALE	HIANI, FL. 33174	19600006332	
DADE, INC.					
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				CRA	
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Note: General partners MAY NOT	he changed on thi	s form: en eme	indment must be filed to chen	ne e general partner	
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 S this annual report is true and accurate and that my sign empowered to execute this report as required by chapter	ection 119 07(3)(k) in the even ature shall have the same legal	t that the information suppl	ied is deemed exempt from public access. I further	certify that the information Indicated on	
SIGNATURE Salman DATE 5-7-97					
	Manage	SALIMAN	/ /3.	ו בנייני הפיינים	