

1996
OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP

DEPARTMENT OF
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 18 AM 10:27

1. Name of Limited Partnership

Aranta Limited Partnership

1a. DOCUMENT #

Mailing Address

Principal Office Address

123 Thornton Drive
West Palm Beach, Florida 33418

3. Date Formed or Registered to Do Business in
FLORIDA
September 3, 1996

3a. Date of Last Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions as Shown
on Record
\$337,624.39

5b. Amount of Capital Contributions in
FLORIDA to date
\$342,607.66

6. FEI Number
65-0693531

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

Irene D. Antoniou
123 Thornton Drive
West Palm Beach, Florida 33418

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

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. Name(s) of General Partner(s)

Aranta Corporation

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

123 Thornton Drive

11b. City, State & Zip Code

West Palm Beach, FL
33418

11c. Registration/
Document Number

P96000069549

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 *Irene D. Antoniou*

DATE 12/13/96

Typed or Printed Name of General Partner Signing Form Aranta Corporation by Irene D. Antoniou Telephone Number

President

CR2E003 (6/95)

1201 HAYS STREET
TALLAHASSEE, FL 32301-2607
904-222-0171
4-222-3333 FAX

800-342-8086

2

A96000001619



networks

PRENTICE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 192421 4327236

AUTHORIZATION : *Patricia Pyzdek*

COST LIMIT : \$ 576.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 18 AM 10:27

ORDER DATE : December 17, 1996

ORDER TIME : 9:53 AM

ORDER NO. : 192421-005

CUSTOMER NO: 4327236

600002032326-1

CUSTOMER: Teresa Ramirez, Legal Asst
Gardner Carton & Douglas
Suite # 3400
321 N. Clark Street
Chicago, IL 60610-4795

ANNUAL REPORT FILING

NAME: ARANTA LIMITED PARTNERSHIP

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol A. Detert

EXAMINER'S INITIALS: _____

RECEIVED
96 DEC 18 AM 10:40
DIVISION OF CORPORATIONS