

A96000001666

REQUESTOR'S NAME: MAZOU CORPORATE INDUSTRIES, INC

ADDRESS: 1090 S.W. 87th Ave, Ft. Lauderdale, FL 33174

CITY/STATE/ZIP: MIAMI, FL 33174

PHONE #: (305) 552-5973

LOCAL REPRESENTATIVE: TALLAHASSE

RECEIVED

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DIVISION OF CORPORATIONS

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. BISCAYNE JOINT VENTURE LTD
 (Corporation Name) (Document #)

2. _____
 (Corporation Name) (Document #)

3. _____
 (Corporation Name) (Document #)

4. _____
 (Corporation Name) (Document #)

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
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 Pick up time 2:00
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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 ***1837.50 ***1837.50

G. TAX _____
 FILING 1750.00
 R. AGENT FEE 25.00
 C. COPY 52.50
 TOTAL 1827.50
 N. BANK _____
 BALANCE DUE _____
 REFUND _____

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

9/9/96

Examiner's Initials BK

CERTIFICATE OF LIMITED PARTNERSHIP
OF

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1. BISCAYNE JOINT VENTURE LTD
(Name of Limited Partnership; must contain a suffix such as "Limited",
"Ltd.", or "Limited Partnership")
2. 200 South Biscayne Boulevard #4815, Miami, Florida 33131
(The Business Address of Limited Partnership)
3. Piero Salussolia
(Name of Registered Agent for Service of Process)
4. 200 South Biscayne Boulevard, Suite 4815, Miami, Florida 33131
(Florida Street Address for Registered Agent)
5. _____
(Registered Agent must sign here to accept designation as Registered Agent for
Service of Process.)
6. 200 South Biscayne Boulevard, Suite 4815, Miami FL 33131
(The Mailing Address of the Limited Partnership.)
7. The latest date upon which the Limited Partnership is to be dissolved is August 30,
2021.

8. NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
D.S. Biscayne ,Inc. <i>PA60000672831</i>	200 South Biscayne #4815 Miami Beach, FL 33131

Signed this 5th day of September, 1996.
Signature of all general partners:

D.S BISCAYNE INC., a Florida corporation

By: _____
Piero Salussolia, Director

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting the sole general partner of BISCAYNE JOINT VENTURE LTD., a Florida Limited Partnership, certifies as follows:

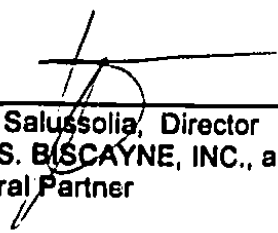
The amount of capital contributions to date of the limited partners is \$552,500.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$552,500.00.

This 5th day of September, 1996.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

By: 
Piero Salussolia, Director
of D. S. BISCAYNE, INC., a Florida corporation,
General Partner

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