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LIMITED
PARTNERSHIP
PEINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

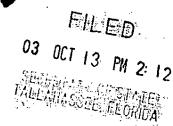
DOCUMENT#

1. Name of Limited Partnership

A96000002323

AMIEL PROPERTIES, LTD.

9/26/03



/05/2/03-01061--006 **1026.25

2. Principal Office Address 3. Mailing Office Address			4. Date Formed or Registered	4. Date Formed or Registered			
3201 LENOX ROAD		3201 LENOX ROAD		To Do Business in Florida			
Suite, Apt. #, etc.	uite, Apt. #, etc. Suite, Apt. #, etc.		5. FEI Number	Applied For			
SUITE #42		582276691	Not Applicable				
City & State	City & State		CERTIFICATE OF STATUS DESIRED	GERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
ATLANTA, GA	Α	ATLANTA, G	Α	7a. Capital Contributions as shown	on Pagard		
Zip	Country	Zip	Country	511,000.00	on Recold.		
30324	USA	30324	USA	7b. Amount of Capital Contributions	lions in FLORIDA to date:		
	8. Name and Address o	f Current Registered Age	nt				
Name				FEI	ES:		
	HARTER SERVICES			1.) Filing Fee(s): Computed at a rate of	of \$7 per \$1,000 on amount entered \$52,50 and a maximum of \$437,50.		
•	x Number is Not Acceptable)			for <u>each year due</u> this office.	\$52.50 and a maximum of \$437.50,		
150 MAGNOL	LA AVENUE	<u> </u>		Supplemental Fee(s): \$88.75 for g with 1992 calendar year.	ach year due this office, beginning		
Suite, Apt. #, Etc.				3.) Penalty Fee(s): \$500 penalty fee for	or each year report form is delinquent.		
City State Zip Code			Note: If the amount entered in 7b	Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate			
DAYTONA BEA	ACH	FL	32114	and appropriate filing fee.	o sponkied dong that a separate		
SIGNATURE (Registered A	h, and accept the obligations of s		·	DATE			
A GENERAL				PARTNERSHIP OR OTHER VE WITH THIS OFFICE.	R BUSINESS ENTITY		
10. Name(s) of G	General Partner(s)		h General Partner Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number		
LYDIA SARDA	A AMIEL	3201 LENC SUITE 42	X ROAD	ATLANTA, GA 30324	A96000002323		
			STATEN	BIC			
Note: General	partners MAY NOT	be changed on th	nis form; an am	endment must be filed to cha	nge a general partner.		

11.	I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of
	Corporations from any liability of non-compliance with Section 119.07(3)(i) 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.

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DATE 10~10-03

Typed or Printed Name of General Partner Signing Form NICHOLAS A. GEORGE, as attorney Telephone Number (386) 253-1697