

0001345 AV

The Seal of the State of Florida is a circular emblem. It features a central figure of a Seminole man standing on a small island, holding a bow in his right hand and an arrow pointing downward in his left. A palm tree stands behind him. The background shows a body of water with a ship and a rising sun. The words "GREAT SEAL OF THE STATE OF FLORIDA" are inscribed around the top inner edge, and "IN GOD WE TRUST" is at the bottom.

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Mailing Address
2665 SOUTH BAYSHORE DRIVE
PENTHOUSE IIA
MIAMI FL 33133

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Applied For	
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Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name _____

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

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE _____

\$594,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

STREET ADDRESS

CITY-ST-ZIP

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100-443887-100

1997-10-17-11162-1030 **526.25

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:  **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date: _____

Daytime Phone # _____

CR2E003 (10/02)