

APPLICATION FOR REINSTATEMENT OF LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A97000001760

1. Name of Limited Partnership
Realty Professionals, Ltd.

2. Mailing Address
600 Corporate Dr.
Suite, Apt. #, etc.
510
City & State
Ft. Lauderdale, FL
Zip
33334
Country
USA

3. Principal Office Address
Same
Suite, Apt. #, etc.
City & State
Zip
Country

4. Date Formed or Registered To Do Business in Florida
8/14/97

5. FET Number
65-0779495

6. CERTIFICATE OF STATUS DESIRED
7. State or Country of Formation
Florida

8a. Capital Contributions as Shown on Record
\$100,000.00

8b. Amount of Capital Contributions in FLORIDA to date
\$100,000.00

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 \$437.50, for each year due this office.
2) Supplemental Fee(s) \$88.75 for each year due this office, beginning with 1992 calendar year.
3) Penalty Fee(s) \$500 penalty 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 appropriate filing fee.

9. Name and Address of Current Registered Agent
DAVID WEISMAN, ESQ.
2021 Tyler Street
Hollywood, FL 33020

10. If changed, new registered agent/officer
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, I, the above named limited partnership organized or registered under the laws of the State of Florida, submit 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 5/5/97

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)
James & Company at
Weston Commerce Lakes,
Inc.

Address of Each General Partner (Do NOT Use Post Office Box Numbers)
600 Corporate Dr.
Suite 510

City, State and Zip Code
Ft. Lauderdale, FL 33334

11a. Registered Business Name
P-97000036300

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REINSTATEMENT 1999

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 in this 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, and am empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE
Typed or Printed Name of General Partner Signing Form
James F. Antenucci, President

DATE
5/5/97

Telephone Number
954 771 8239

CR2E038 (12/98)