| PLEASE READ | ALL INSTRUCTIONS BEFO | DRE COMPLETING THIS FORM | |
|--|---|---|-----------------|
| LIMITED PARTNERSHIP | CORIDADERA I MINIO S Kettle in lea is Secretary of State | 12370 FILED | |
| REINSTATEMENT | DIVISION OF CORPORATIONS | 01 MAR 20 PM 4: 43 | |
| DOCUMENT # A9700002370 1. Name of Limited Partnership | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
| LAKE MAGIC, LTD. | 929/00 | | |
| 2. Principal Office Address 2922 CARDINAL DRIVE | 3. Mailing Office Address 2922 CARDINAL DRIV | 4. Date Formed or Registered To Do Business in Florida 11/97 |] |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 5. FEI Number Applied For Wot Applicable | 1 |
| City & State VERO BEACH, FL | City & State VERO BEACH, FL | CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status | |
| 32963 Country INDIAN PIVER | Zip 32963 Country INDIAN RICE | 7a. Capital Contributions as shown on Record: \$ 150,000.00 | |
| | f Current Registered Agent | 7b. Amount of Capital Contributions in FLORIDA to date: | 1 |
| Name PICHARD G. SCHAUB JR. Street Address (P.O. Box Number is Not Acceptable) 2922 CARDINAL DRIVE Sury Apt. #, Etc. | | FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, 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. | |
| JERO BEACH | State Zip Code FL 32963 | | |
| for the purpose of changing its registered office or regis agent. I am familiar with, and accept the obligations of s | 99, Florida Statutes, the above-named limited partners tred agent, or both, in the State of Florida. Such change action 620.192, Florida Stajutes | ship organized or registered under the laws of the State of Florida, submits this statement be was authorized by its general partner(s). I hereby accept the appointment of registered | CR2E039 (11/99) |
| A GENERAL PARTNER THAT I | S A CORPORATION, LIMITED | D PARTNERSHIP OR OTHER BUSINESS ENTITY | Ö |
| MUST | BE REGISTERED AND ACTI Address of Each General Partner | IVE WITH THIS OFFICE. City State and Tip Code. 102 Registration | |
| 10. Name(s) of General Partner(s) | (Do NOT Use Post Office Box Numbers) | Document Number | - |
| ADM - 1, 000,00 | 2922 CARDINAL DRIVE | 5000039130153 -03/27/0101098018 ***3102.50 ****3102.50 | |
| APM - 1,000,00 AR 875.00 ARSUPP - 177.50 2,052.50 | PENS | TATEMENT 2000 - 200 | |
| 2,052.30 | | (THC) | |
| Note: General partners MAY NOT | be changed on this form; an am | nendment must be filed to change a general partner. | |
| Corporations from any liability of non-compliance with | Section 119.07(3)(i) in the event that the information sur | the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of applied is deemed exempt from public access. I further certify that the information indicated under oath. I further certify that I am a General Partner of the limited partnership, receiver or | |
| SIGNATURE X | Jumle / | DATE 3 15 01 | l |

SIGNATURE _ Typed or Printed Name of General Partner Signing Form ALCHARD G. SCHAUS , JR. 561-234-3156 Telephone Number _