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1ST NOTICE: DUE ON OR BEFORE DECEMBER 31, 1994

LIMITED PARTNERSHIP ANNUAL REPORT 1995 8		 FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership EMS SOUTH FLORIDA DEVELOPMENTS, LTD.		1a. DOCUMENT # A97000002459	
Mailing Address Mr. Elliot Sud 32 Ridelle Avenue Toronto Ontario M6B 1H6		Principal Office Address 98-AR CM	
3. Date Registered to Do Business in FLORIDA November 7, 1997		3a. Date of Last Report Florida	
5a. Capital Contributions as Shown on Record \$100.00		5b. Amount of Capital Contributions in FLORIDA to date: \$180,100.00	
6. FEI Number Applied for		7. ☒ Applied For ☐ Not Applicable	
8. THE BASIC ANNUAL REPORT FILING FEE IS FIGURED AT THE RATE OF \$7.00 PER THOUSAND ON THE ACTUAL CAPITAL CONTRIBUTION PLUS A SUPPLEMENTAL FEE OF \$138.75 PURSUANT TO s.607.193, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75). For questions concerning filing fees, please call (904) 487-6056. Please submit your 1995 annual report with a check payable to the Secretary of State in U.S. funds through a U.S. bank. FF \$526.25			
9. Name and Address of Current Registered Agent Leonardo F. Brito, Esq. 8005 N.W. 155th Street, Suite B Miami, Florida 33016		10. If changed, new registered agent/office Name Gregory J. Ritter, Esq. Street Address (P.O. Box Number is Not Acceptable) 7000 W. Palmetto Park Road Suite, Apt. #, etc. Suite 400 City Boca Raton, FL Zip Code 33433	
10a. Pursuant to the provisions of sections 620.1061 and 620.122, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits 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 _____			
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) Sud Developments, Inc.	11a. Address of Each General Partner(s) (Do NOT use Post Office Box Numbers) 1950 S. Ocean Dr. Apt. # 14J	11b. City and State Hallandale, FL 33009	11c. Registration Document Number P97000095268

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 indicated on this annual report is true and accurate and that my signature shall have the same legal effect 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.

SIGNATURE *Elliot Sud*
ELLIOTT SUD - PRES.

DATE **APRIL 6/98**
4/6/98 3:22Z

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