FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND <u>\$500 PENALTY FEE</u> FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS 98 SEP -8 AM 9: 05 DOCUMENT # 1a. 1. Name of Limited Partnership. A97000002603 Myrtha V. Kroh Family Ltd. Partnership 3. Date Formed or Registered **5a.** Capital Contributions as Shown on record Mailing Address Principal Office Address 12-2-97 C/o Robert B. Smith, P.A. \$10,000.00 3a. Date of Last Report One N.E. 2nd Avenue (USD) Suite 208 First **5b.** Amount of Capital Contributions in FLORIDA So date: Miami, Florida 33132 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address \$10,000.00 FL 11937 S.W. 73rd Ter Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable City & State City & State 7. Certificate of Status Desired Miami, Florida Country \$8.75 Additional Fee Required Country 8. Make check payable to: Dept. of State (See reverse side for fee information) USA 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Street Address (P.O. Box Number Is Not Acceptables 435 Sabrina Chassagne, Esq. 09/10/98-**-0**1066--023 One N.E. 2nd Avenue ****317.50~ ****317.50 Suite 208 Suite, Apt. #, etc Miami, Florida City Zip Code 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Flonda 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. 11b. City, State & Zip Code Name(s) of General Partner(s) 11c. 11937 S.W. 73rd Ter Miami, F1orida Myrtha Vilbon Kroh 33183 Notile: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. do horeby contify 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 prorations 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 Opporations from any liability of non-compliance with Section 119 O/(3)(k) in the event that the minimation supplied is deemed exempt from public december of the limited partnership, receiver or trusted this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted DATE 8/26/98

SABRINA CHASSAGNE, P.A.

Attorney and Counselor at Law The White Building One N.E. 2nd Avenue, Suite 208 Miami, Florida 33132 (305) 358-0005 (305) 379-2822 Fax

August 28, 1998

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Reinstatement of MYRTHA V. KROH FAMILY LTD. PARTNERSHIP A97-000002603

Dear Secretary of State Representative:

Undersigned counsel is the registered agent for the above referenced partnership. Enclosed herein please find the annual report and a check in the amount of \$317.50. Please be advised that the undersigned never received the annual report forms as a result of undersigned's change of office address.

Thank you for your cooperation and prompt attention to this matter.

Sincerely,

Sabrina Chassagne

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