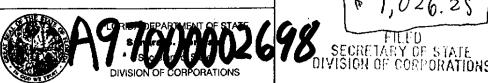
APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP



- Limit CD 1 74111	112.10.111				J 🗛		
DOCUMENT # A97000002698 1. Name of Limited Partnership					98 JUN 18 PM 1: 05		
B.S.D. PAR	TNERSHIP, LAD.		41	olas	DO NOT WRITE IN THIS SPA	NCE.	
2. Mailing Address 701 Brickell Avenue		3. Principal Office Address 1500 San Remo Avenue		nue	4. Date Formed or Registered To Do Business In Florida 12–11–97		
Suite, Apl. #, etc. Suite- 3000		Suite, Apt. #, etc. Suite 135			5. FEI Number		Applied For
City & State		City & State		 .	65-0801785		Not Applicable
Miami. FL		Coral Gables, FL			6. \$8.75 Additional Fee require		
Zip.	Country	Zip .	Country				cate of Status
33131	USA	33146	USA		7. State or Country of Formation Florida	ì	
Ba: Capital Contributions as Shown on Record: \$1,000,000.00		FEES:1.) Filing Fee(s): Computed at a rate of \$7 per \$1,00 \$437.50, for <u>each year due</u> this office. 2.) Supplemental Fee(s): \$88.75 for <u>each year due</u> the 3.) Penalty Fee(s): \$500 penalty fee for <u>each year re</u> Note: If the amount entered in 8b is greater than amount entered appropriate filing fee.			00 on amount entered in 8b, with a minimum filing fee o	f \$52.50 an	nd a maximum o
Bb. Amount of Capital Contributions in FLORIDA to date:					eport form is delinquent	long with a	separate and
9. Name and Address of Current Registered Agent				10. If changed, new registered agent/office			
				Name			
INTRASTATE REGISTERED AGENT CORPORATION 1 701 BRICKELL AVENUE SHITE 3000			Street Address (P.O. Box Number Is Not Acceptable)				

10a. Pursuant to the provisions of sections 620.1051 and 620.192, 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, 1 am familiar with, and accept the obligations of section 620.192, Florida Statutes.

Suite, Apt. #, etc.

SIGNATURE (Registered Agent Accepting Appointment)

MIAMI; FL 33131

DATE

Zip Code

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)	(Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Document Number
COMMERCIAL FLORIDA REAL ESTA	1500 SAN REMO AVENUE	CORAL GABLES FL 33146	P97000104384
PEWALTY 500.00 190 437.50 86.75	REINSTA	***2fi	5717566 798-01008012 52.50 ***1026.25
MRSUPP 88:13		(hi)	·

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

2. 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 D.vision 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 logal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes.

DATE

DATE

CR2F039 (12/97