

## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED 99 NOV 10 MIII: 46

SECRETART OF STATE FALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

APPLICATION FOR
REINSTATEMENT
FOR
MITED DARTNERSHIP

**DOCUMENT#** 1. Name of printed Partnership

A97000002832 - AMENTEA, LTD.

2. Marling Adoress		3. Principal Office Address		Date Formed or Registered To Do Business in Florida 12/23/97			
3621 Bayou Sound		3621 Bayou Sound		To Do Business in Florida 12/23/97			
Suite. Apt. # etc		Suite. Apt. #, etc.		5. FEI Number	7 ( 2 ) 7	Applied For	
City & State		City & State		65080622 Noi Applicable			
Longboat Key, FL		Longboat Key, FL		6. St. // Add to not be required			
Zip	Country	Zıp	Country	CERTIFICATE OF ST	CERTIFICATE OF STATUS DESIRED		
34228	Sarasota	34228	Sarasota	7. State or Country of	7. State or Country of Formation Florida		
8a. Capital Contributions as Shown on Record: \$250,000  8b. Amount of Capital Contributions in		\$437.50, for <u>each year due</u> this office. 2.) Supplemental Fee(s): \$88.75 for <u>each year december</u> 3.) Penalty Fee(s): \$500 penalty fee for <u>each year</u>		fice. <u>tach year dus</u> this office, beginning with 15 for <u>each year report form is delinquent</u> .	i1,000 on amount entered in 8b, with a minimum fiting fee of \$52.50 and a maximum of dug this office, beginning with 1992 calendar year. at report form is definited.		
<b>FLORIDA</b> to date \$250,000		Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental efficient must be submitted along with a substitute and appropriate filing fee.				ong with a subspine and	
9	Name and Address of Current (	Registered Agent		10. If changed, ne	10. If changed, new registered agent/office		
William G. Lambrecht, Esq.			Name	17.43			
200 South Ord Sarasota, FL	ange Avenue	Street Address (P.O		dress (P.O. Box Number Is Not Acceptal	). Box Number is Not Acceptable)		
			Suite. Ap	Suite. Apl. #. etc.			
			City	City FL Zip Code			
for the purpose of agent. I am famili SIGNATORE (Registered A	of changing its registered office or re- iar with, and accept the obligations.  Agent Accepting Appointment)  PARTNER THAT I	egistered agent, or both, in the St of section 620 192, Florida Statut IS A CORPORATIO	ete of Florida. Such of	thership organized or registered under the lange was authorized by its general partress.  D PARTNERSHIP OR IVE WITH THIS OFFICE	DATEDATE	ppointment of registered	
11. Names of Ger	nera-Partner(s)	Address of Each C (Do NOT Use Post Off		City, State and Zip Cod	• 11a.	Registration Document Number	
MDS Holdings,	Inc.	3621 Bayou Soun	nd age	Longboat Key, FL 3		22-4	
	REINS	TATEMEN	T 99		1030519: 11/22/98011 ***1026.25 *	39002 *** <i>102625</i>	
			52				
			•				

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

12: High noresty, certify that the information supplied with this filling 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 inis annual report is true and accurate and that my signature shall have the same legal effects as it made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee. MDS Holdings, Inc., General Partner - Maria DeSanto as Its President

DATE 10-29-99