

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Division of Corporations

1900 North West 11th Street, Suite 1000, Fort Lauderdale, FL 33304

Phone: (305) 399-2000

Telex: 510000

Fax: (305) 399-2000

Internet: www.flsos.gov

Web: www.flsos.gov

99 SEP -2 AM 9: 33

DO NOT WRITE IN THIS SPACE

DOCUMENT # A97000002865

1. Name of Limited Partnership

EXCLUSIVE REAL ESTATE INVESTMENTS, LTD.

2. Mailing Address
10735 S.W. 58th Avenue

3. Principal Office Address
10735 S.W. 58th Avenue

4. Date Formed or Registered
To Do Business in Florida December 26, 1997

City & State
PINECREST, FL

City & State
PINECREST, FL

5. FEI Number
65-0802277

Applied For
Not Applicable

Zip
33156

Country
USA

Zip
33156

Country
USA

6. CERTIFICATE OF STATUS DESIRED ☐ SR 75 Additional fee required for a Certificate of Status

7. State or Country of Formation
FLORIDA

8a. Capital Contributions as Shown
in Report
\$5,000,000.00

8b. Amount of Capital Contributions in
FLORIDA to date
\$500,000.00

FEES: 1) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
2) Supplemental Fee(s): \$103.75 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.
Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

LORIE, LUIS F.

Name
Street Address (P.O. Box Number Is Not Acceptable)
10735 S.W. 58th Avenue
Suite, Apt #, etc.
City
Pinecrest
Zip Code
FL 33156

10a. I hereby certify that 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. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

Signature of Registered Agent Accepting Appointment

DATE Sept. 1, 1999

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name of General Partner(s)

Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration
Document Number

LORIE INVESTMENTS, INC.

10735 S.W. 58th Avenue

Pinecrest, FL 33156

997000106510

PENALTY - 1000.00
AR - 875.00
AIR SUPP - 177.50
\$ 2,052.50

000002988470--?
-09/16/99--01019--007
***2052.50 ***2052.50

REINSTATEMENT 1998-1999

(BIC)

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

12. I 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 effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee or empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE By: LORIE INVESTMENTS, INC.
LUIS F. LORIE, as President

DATE Sept. 1, 1999

Typed or Printed Name of General Partner Signing Form

Telephone Number

CR2E039 (1/97)