PLEASE READ	ALL INSTRUCTIONS BEFORE	COMPLETING THIS FO	DRM. 182
	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	02 OCT 31	PM 2: 08
1. Name of Limited Partnership  THE AMERICAS PU	BLISHING GROUP, LTD	SECRETAR) TAREAHASS	BEL FLORIDA
2. Principal Office Address	3. Mailing Office Address	4. Date Formed or Registered To Do Business in Florida	- 12-1998
200 S.E. 1ST STREET Suite, Apt. #, etc.	<i>Loo SE. 15T STREET</i> Suite, Apt. #, etc.	5. FEI Number	Applied For
SUITE 601	SUITE 601	65-0854760	Not Applicable
City & State	City & State	CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
MIAMI, FL Zip Country	MiAMi, FL _Zip	7a. Capital Contributions as shown o	
33131 USA	33131 USA	<b>4</b> 570, 6 <b>7b.</b> Amount of Capital Contributions in	000,00
8. Name and Address of	Current Registered Agent	Amount of Capital Contributions in	TPEORIDA to date:
Name CORPORATION S	ERVICE COMPANY	FEE: 1.) Filing Fee(s): Computed at a rate of	11
Street Address (P.O. Box Number is Not Acceptable)		in 7b, with a minimum filing fee of \$5 for <u>each year due</u> this office.	2.50 and a maximum of \$437.50,
1201 HAUS STREET Suite, Apt. #, Etc.		2.) Supplemental Fee(s): \$88.75 for each with 1992 calendar year.	li li
City	State Zip Code	<ul> <li>3.) Penaity Fee(s): \$500 penalty fee for Note: If the amount entered in 7b is 7a, a supplemental affidavit must be</li> </ul>	greater than amount entered in
TALLAHASSEE	FL 32301-2525	and appropriate filing fee.	y war a coparato
9. Pursuant to the provisions of sections 620.1051 and 620. for the purpose of changing its registered office or register agent. I am familiar with, and accept the obligations of sections.	red agent, or both, in the State of Florida. Such change was au	anized or registered under the laws of the State thorized by its general partner(s). I hereby acco	of Florida, submits this statement ept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointment)		DATE	
	S A CORPORATION, LIMITED PA BE REGISTERED AND ACTIVE V		BUSINESS ENTITY
10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
MAGIC DOG PRODUCTION INC.	VS 200 S.E. IST STEET A	2/AMI, FL 33131	p94000071709
		<b>00000884</b> 11/07/02010040	
			der 18/01
Note: General partners MAY NOT b	e changed on this form; an amendr	ment must be filed to chang	ge a general partner.
11. 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)(i), Florida Statutes. I release the Division of Corporations from any liability of for compliance with Section 119.07(3)(i) in the eyent that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and for current 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 emprecation is reported to execute his report as required by channel 620, Florida Statutes.			

RICHARD ROFFMAN

October 31, 2002

Marsha Thomas Division of Corporations 409 East Gaines Street Tallahassee, FI 32399

Dear Ms. Thomas,



Please allow this letter to serve as confirmation that we did not receive the initial re-instatement letter for the Americas Publishing Group, LTD. As per our telephone conversation, you were in receipt of the reinstatement document along with noted check for \$526.25. We would also like to have the re-instatement fee waived.

Your prompt attention to this matter is greatly appreciated. Please feel free to confact me at (305) 379-118 if you require additional information.

Sincerely,

Mercedes de la O