DOCUMENT # A9800000840 1. Entity Name	**		0003794 A
ALAMEDA, LTD.	(<u>`</u>	FILED	₽
Principal Place of Business Mailing Address		01 MAR 28 AN 7: 16	
555 SOUTH POMPANO PARKWAY % STEEL, HECTOR & DAV POMPANO BEACH FL 33069 200 S. BISCAYNE BLVD S MIAMI FL 33131		SECRETARY OF STATE TALLAHASSEE ELONGO	
2. Principal Place of Business Aine De Steel Hoctor +	DAVIS		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	olvd, Ste #4100	, y	_
Pompono Black F/ MIAMI, F/	33131	4. FEI Number 65-0833456 Applied For Not Applicable	
	MINNI - DAde	5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent	Name	7. Name and Address of New Registered Agent	1
RJVF CORPORATE SERVICES, INC. % STEEL, HECTOR & DAVIS	Street Address	(P.O. Bok Number is Not Acceptable) PISCAYNE BIND., Suite 4100	
200 S. BISCAYNE BLVD., SUITE 4000	% 57]
MIAMI FL 33131	City	FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its	registered office or registe	ared agent, or both, in the State of Florida.	1
SIGNATURE	resident	3/36/01	ľ
9. Capital Contributions \$1 000 10. Amount of Capita		11. MAKE CHECK PAYABLE TO DEPT. OF STATE	
A GENERAL PARTNER THAT IS A BUSINESS EN	TITY MUST BE REGIS		1
NOTE: General Partners MAY NOT be changed on the General Partner INFORMATION	e form; an amendmer	ADDRESS CHANGES ONLY	1
DOCUMENT / P94000090940 /	STREET ADDRESS		1/00/
VAME MISTY/INWOOD CORP. 578 SOUTH POMPANO PARKWAY	CITY-ST-ZIP		33 (1
DOCUMENT / POMPANO BEACH FL 33069	STREET ADDRESS	5000039615450 -04/05/0101101014	CR2E003
NAME Street address	CITY+ST-ZIP	****141.25 ****141.25	1
CITY-ST-ZIP DOCUMENT #			4
NAME STREET ADDRESS	STREET ADDRESS		-
CITY-ST-ZIP	CITY-ST-ZIP		
OCUMENT #	STREET ADDRESS		
STREET ADDRESS	CITY-ST-ZIP		
CITY-ST-ZIP			
DITY-ST-ZIP DOCUMENT #	STREET ADDRESS		
DOCUMENT # AMME STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP		
CITY-ST-ZIP DOCUMENT # HAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #	1		
CITY-ST-ZIP COCUMENT # STREET ADDRESS CITY-ST-ZIP COCUMENT #	CITY-ST-ZIP		

the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes 03/20/01 954. 9684408

Daytime Phone #

SIGNATURE: