

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED
PARTNERSHIP
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Division of Corporations
TALLAHASSEE, FLORIDA

A98000000844

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A98000000844

1. Name of Limited Partnership

Boca-Mandy Acquisitions Ltd.

4/14/99

2. Principal Office Address
678 Unidell Realty Corp.
17152 Mandy Lynn Court

3. Mailing Office Address

Suite, Apt. #, etc.

4. Date Formed or Registered
To Do Business in Florida

4/1/98

5. FEI Number

☒ Applied For
☐ Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐ \$3.75 Additional fee required
for a Certificate of Status.

7a. Capital Contributions as shown on Record:

7b. Amount of Capital Contributions in FLORIDA to date:

FEES:

- 1) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
 - 2) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
 - 3) Penalty Fee(s): \$530 penalty fee for each year report form is delinquent.
- Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

9. 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. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Carmie Byers

DATE

8/8/01

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

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
Boca-Mandy Corp., a Florida corporation	17152 Mandy Lynn Ct. BK	Boca Raton, FL 33496	798000027169 400004525254-- -08/09/01--01029--004 *****17.50 *****17.50 400004525254--7 -08/08/01--01102--001 ***2973.75 ***1915.00
REINSTATEMENT 1999-2001			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change 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 non-compliance with Section 119.07(3)(i) 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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Jane Yudell Pres

DATE

8.6.01

Typed or Printed Name of General Partner Signing Form

Jane Yudell, President

Telephone Number 561-451-2628

of Boca-Mandy Corp.,
general partner