LIMITED PARTNERSHIP APPRUVEL 2002 **UNIFORM BUSINESS REPORT (UBR)** AND **DOCUMENT #** A98000001146 02 JUN 11 AM 9:59 1. Entity Name THE GOLDEN RIVERSIDE LIMITED PARTNERSHIP SECRETARY OF STATE TAULAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE 10900 NW 3rd STREET 10028 W. OAKLAND PARK \_ . .Suite. Ant # etc DUE BY MAY 1 4. FEI Number 65-0910326 Applied For City & State SUNRISE, --FL City & State PLANTATION. Not Applicable Country USA \$8.75 Additional Zip Country 5. Certificate of Status Desired USA 33351 7. Name and Address of Current Registered Agent LIBERTAD A. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Zip 36324 City PLANTATION, FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE Amount of Capital Contributions in FLORIDA to date. 9. Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner GENERAL PARTNER INFORMATION 12. PALMA, LIBERTAD A. 10900 NW 3rd STREER DOCUMENT # STREET ADDRESS NAME PLANTATION, FL 33324 CR2E003B STREET ADDRESS CITY-ST-ZIP <u>600005763996--9</u> -06/13/02--01003--002 CITY-ST-ZIP DOCUMENT # PALMA, RICARDO 10900 NW 3rd STREET STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 NAME STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33324 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: & Libertar le Palua