| LIMI TED |
|-----------------|
| PARTNERSHIP |
| REINSTATEMENT |

DOCUMENT#



A98000001549

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 NOV -1 PH 1:02

| STEVEN FE | Partnership | ARTNERSHIP | | , * | | MINSTATE | WENT | 2000 | | |
|---|---|---|---|----------------------------|--------------------------------------|--|-----------------------------|----------------------------|--|--|
| 2. Principal Office Address 3. Mailing Office Address | | | | | | 4. Date Formed or Registered | | | | |
| 14 Isla B | 14-1sla- | Bahia | Drive | ~ ~: | To Do Business in Florida 06/25/1998 | | | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, et | tc. | | | 5. FEI Number | | Applied For | | | |
| | | | | • | | 65-3516980 | | Not Applicable | | |
| City & State | City & State | City & State | | | 6. CERTIFICATE OF STATUS DESIRED | | litional Fee required | | | |
| Ft. Laude | Ft. Laud | lerdale | e, FL | • | | | | | | |
| Zip | Country | Zip | Country | | | 7a. Capital Contributions as shown on Record: | | | | |
| 33314 | US | 33314 | | US | | \$1,252,000.00 7b. Amount of Capital Contributions in FLORIDA to date: | | | | |
| | 8. Name and Addre | ess of Current Registe | red Agent | | | \$1,252,000.00 | | | | |
| Street Address (P.O. 14 Is1 Suite, Apt. #, Etc. City Ft. La 9. Pursuant to the profor the purpose of agent. I am familiar SIGNATURE (Registered | changing its registered office or with, and accept the obligation of Agent Accepting Appointmen | nd 620.192, Florida Statutes registered agent, or both, ns of section 620.192, Florid | ed agent, or both, in the State of Florida. Such change wa | | | 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): \$500 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. organized or registered under the laws of the State of Florida, submits this statement authorized by its general partner(s). I hereby accept the appointment of registered | | | | |
| A GENERA | L PARINER IN. ML | JST BE REGIS | TERE | ON, LIMITED O AND ACTIV | VE W | TNERSHIP OR OTHER ITH THIS OFFICE. | BOSINES | SO ENIIIT | | |
| 10. Name(s) | of General Partner(s) | Addre | Address of Each General Partner (Do NOT Use Post Office Box Numbers) | | | City, State and Zip Code | | Registration cument Number | | |
| Feder Holdings, Inc. 14 Isla I | | | Bahia | a Drive | Ft. | Lauderdale, FL 33314 | P980000 |)50550 | | |
| | | | - | | - | 6000034 -11/21/1 ***102 | 7353 00-0111 0.25_*** | 369 3006 *1026.25 | | |

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

| 11. | 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 regard as Equited by chapter 620, Florida Statutes. FRDER HOLDINGS, INC., general partner |
| | 7 / / / / / / / / / / / / / / / / / / / |
| | / NV - |
| SIG | NATURE X DATE |
| | |
| | DV. COURTE TO THE PROPERTY OF |
| T | RY. STEVEN L. FEDER. President |

CR2E039 (11/99)