PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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LIMITED FLORIDA DEPARTMENT OF STATE PARTNERSHIP Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS						1 SEP 29 F	FILED
DOCUMENT # A9900000983 1. Name of Limited Partnership						PH 2: 31	STAIL
Hometown Station, Ltd.						- (F (3.)
Principal Office Address - No P.O. Br	3. Mailing Office Address			300212720643 09/29/1101029009 **4000.00 CR2E039 (1/11)			
1200 West 49th Street		1200 West 49th Street					
Suite, Apt. #, etc.		Suite. Apt. #, etc.			Date Formed or Registered To Do Business in Florida	06/18/1999	
City & State Hialeah, FL	City & State Hialeah, FL			5. FEI Number 65-10764	Applied F		
33012 CUSA		33012 ÚSA			6. CERTIFICATE OF STATUS DESIRED	S9.75 Auditional Consess	uired
8. Name and Address of Current Registered Agent				7. FEES:			
Ğüs Machado, Sr.				Filling Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$88.75 for each year due this office.			
1200 West 49th Street				Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.			
Suite, Apt. #, Etc.				E-mall Address:			
city Hialeah	FL 33672			machadogus@aol.com E-Mail address to be used for future annual report notices.			
Pursuant to the provisions of section 620,1810 or 620,1909, Florida Statutes. I hereby accept the appointment of register Florida Statutes.							7
SIGNATURE (Registered Agent Accepting App	9/28/11	_					
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 (Do NOT Use Post Offi			Crty, State and Zip Code	10a. Registration Occument Number	
Permanentia Inc.		1200 West 49	th Street	Hia	leah, FL 33012	P96000078002	
REINSTATEMENT 2008-2011							
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.							
11. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes, I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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, Jam aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817,155, F.S.							
SIGNATURE DATE 9/28/11							
Gus Machado, Sri, Rresident							