1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT

UBR

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 DEC 18 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A99000001570

1. Name of Limited Partnership: MADEIRA, LTD.

2. Principal Office Address	3. Mailing Office Address
1541 BRICKELL AVE.	99198 OVERSEAS HWY.
Suite, Apt. #, etc. #407	Suite, Apt. #, etc. SUITE #7
City & State MIAMI, FL	City & State KEY LARGO, FL
Zip 33029 Country USA	Zip 33037 Country USA

4. Date Formed or Registered To Do Business in Florida: 9-27-99

5. FEI Number: 65-0953406 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7a. Capital Contributions as shown on Record: 819,520.00

7b. Amount of Capital Contributions in FLORIDA to date: 819,520.00

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): $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.

8. Name and Address of Current Registered Agent

Name: ANN POSSCHELLE

Street Address (P.O. Box Number is Not Acceptable): 4210 BRAGANZA ST.

Suite, Apt. #, Etc.

City: COCONUT GROVE State: FL Zip Code: 33133

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) ________ DATE ________

CR2E030 (8/00)

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
MRP, INC.	1541 BRICKELL AVE #407	MIAMI, FL 33029	P95000042954

300004745363--1
-12/31/01--01077--003
***1061.25 ***1061.25

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 [signature] DATE DEC 2 2001

Typed or Printed Name of General Partner Signing Form: ROBERT PARIENTE AS PRES OF "MRP" Telephone Number: 305 8581070

2052

FILED
01 DEC 18 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To : DIVISION OF CORPORATIONS
ATTN : PARTNERSHIP SECTION
409 E GAINES ST , TALLAHASSEE , FL 32399

RE : MADEIRA LTD /DOCUMENT #A99000001570

MIAMI , DEC 2 2001

Dear Ladies,
Dear sirs :

This letter is to request a waiver of penalties for delinquent filing of uniform business reports for 2000 and 2001.
According to our accountant these forms were never received.
Please make a note for any future correspondence of our corrected mailing address :
MADEIRA LTD. C/O ANDERSEN ACCOUNTING & FINANCIAL SERVICES ,
99198 OVERSEAS HWAY , SUITE 7 , KEY LARGO FL33037

thank you for the kind attention you will reserve to this matter.

Sincerely yours

, as Pres M.R.P inc

ROBERT S. PARIENTE , PRES MRP INC

Madeira Ltd.
M.R.P. corporation / Robert S. Pariente pres.
1541 Brickell avenue , suite 407, Miami , Florida 33129. tel 3058581070, f 3058580089
par245@aol.com
Casa Morada all suite Hotel . 136 Madeira road . Islamorada , fl 33036 tel. 3056640044 f. 3056640674