PLEAGE REAL	ALL INSTRUCTIONS BEFO	ORE COMPLETING THIS F	DRM.	
LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF S Katherine Harris Secretary of State DIVISION OF CORPORATIONS	TE SECRETARY OF STATE DIVISION OF CORPORATIONS D2 JAN 31 AM 9: 51		
DOCUMENT # B000000000	19			
1. Name of Limited Partnership				
FOR EXESTATE LP	NT 2001			
2. Principal Office Address	3. Mailing Office Address	4. Date Formed or Registered		
285 W. 74TH, PL	SAME	To Do Business in Florida	To Do Business in Florida 5/1/79	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number Applied For		
	Carlo	59-2004111		
City & State	City & State	6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
HIALEAH, FL		78. Cappai Contributions as shown:		
Zip Country	Zip Country		1 3.381.47B	
33014 USA			7b. Amount of Capital Contributions in FLORIDA to date:	
8. Name and Address	of Current Registered Agent	1690739		
Name 0 T 02	Sundens	FER		
CT Corporation Systems Street Address (P.O. Box Number is Not Acceptable)		1.) Filing Fee(s); Computed at a rate of in 7b, with a minimum fling fee of \$5		
1200 S. Pine Island Rd		for <u>each year due</u> this office. 2.) Supplemental Fee(s): \$88.75 for <u>eac</u>	th <u>year due</u> this office, beginning	
Suite, Apt. #, Etc.		with 1992 calendar year. 3.) Penalty Fee(a): \$500 penalty fee for	each veer moort form is delinquest.	
City			preater then amount entered in	
Plantation	FL 33324	7a, a supplemental afficient must be submitted along with a apparate and appropriate filing fee.		
9. Pursuant to the provisions of sections 620.1051 and 620.192. Florids Statutes, the above-named limited pertnership organized or registered under the lews of the State of Florids, submits the esteement for the purpose of changing its registered office or registered agent, or poth, in the State of Florids. Sulph change was authorized by its general pertner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 803.192 Florids Statutes.				
SIGNATURE (Registered Agent Accepting Appointment)	that When		10/25/2001	
A GENERAL PARTNER THAT IS A CORRORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY				
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
10. Name(e) of General Partner(s)	Address of Each General Partner (Da NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number	
FOR EYES REAL ESTATE GP, INC	314 S. STATE STREET	DOVER, DE 19903	F00000000377	
	JOIN OF STATE OF REET		350898 2	
		80000	0201058009.	
		174	7.,00 <u></u> 1035.0¶_	
DEINIOTATEDAS.	1 2001	1	\$	
REINSTATEME	VIT		F"1,006.05	
		1 d	us 8.75	
			1	

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 filling is voluntarily furnished and dose not qualify for the examption stated in Section 119.07(3)(i), Fords 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 exampt from public access. I further certify that the information indicated on this arrival report is but and sycluste and that my algorithe same legal effects self made under certify that I am a General Partner of the limited partnership, receiver or trustee empowered to suggest this report eagregated by chapter 62th florids Statutes.

SIGNATURE.

Typed or Printed Name of General Penner Signing Torm

. DATE _____

_ Telephone Number .



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 6, 2001

FOR EYES REAL ESTATE, LP 285 W. 74TH PL HIALEAH, FL 33014

SUBJECT: FOR EYES REAL ESTATE, LP

Ref. Number: B00000000019

We have received your document for FOR EYES REAL ESTATE, LP and check(s) totaling \$1038.00. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 201A00064437

SECRETARY OF SIALE DIVISION OF CORPORATIONS