PLEASE REA	AD ALL INSTRUCT	IONS BEFORE	COMPLETING THIS FORM.	
LIMITED PARTNERSHIP REINSTATEMENT 2001-2002		ne Harris ry of State	SECRETARY OF STATE DIVISION OF CORPORATIONS / 18 02 JAN 15 AM11:08	
DOCUMENT # B.0000. 1. Name of Limited Partnership MAtthews, MATSON ?	0000256 Kelley LTN			
2. Principal Office Address 8866 Gulf Freeway SAME		958	4. Date Formed or Registered To Do Business in Florida	
Suite, Apt. #, etc. Suite 540 City & State	Suite, Apt. #, etc. City & State		5. FEI Number Applied For 16 - 06 26 005 Not Applicable 6. \$8.75 Additional Fee require for a Certificate of Status	
Zip Zip 71017 Country	Zip	Country	 7a. Capital Contributions as shown on Record: 1,000 2 7b. Amount of Capital Contributions in FLORIDA to date: 	
	ss of Current Registered Age	nt		
Name <u>J. Roger PARRy</u> Street Address (P.O. Box Number is Not Acceptable) <u>MARSH HAKOS PRIVE</u> Suite, Apt. #, Etc. City FERNAJDINA BEACH FL 3703cf			 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. 	

uthorized by its ge agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)		DATE		
A GENERAL PARTNER THAT MUS	IS A CORPORATION, LIMITED PAI T BE REGISTERED AND ACTIVE V	RTNERSHIP OR OTHE NITH THIS OFFICE.	R BUSINESS ENTITY	
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	
8866 MANASEMENT LLC	8866 Gulf Frwy #540 Houston To 47017		M 0000000 M00.	
			7953585 /0201090001 82.50 ****282.50	
Note: General partners MAY NOT	be changed on this form; an amendn	nent must be filed to ch	ange a general partner.	
Corporations from any liability of non-compliance wit	this filing is voluntarily furnished and does not qualify for the exert th Section 119.07(3)(i) in the event that the information supplied is ny signature shall have the same legal effects as if made under or d by chapter 620. Florida Statutes.	is deemed exempt from public access. I fu	in the certify that the information indicated	

SIGNATURE Marte of General Partner Signing Form WJ Core

<u>0 2</u> __ DATE 7800 4

_ Telephone Number <u>113</u>

2962

Telephone: 713-941-7800 Fax : 713-946-2459

MM & K LTD. 8866 GULF FREEWAY SUITE 540 HOUSTON, TX 77017

January 8, 2002

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

SUBJECT: DOC NUMBER B0000000256

Dear Sir or Madam:

I recently received the attached notification of Revocation for non filing the required forms. I called your office and spoke with one of your representatives. I told her that we had never received the forms and asked what I should do to file the required forms. She gave me the amounts due and told me to write this letter indicating that I had never received the forms to file. I am attaching the required form with the check as indicated by your representative.

Thank you so much for your time and consideration in this matter and if I can provide any further information, please just let me know.

Sincerely,

on Cole Accountant

JAN сл Сл AM 11: 08