CR2E003 (5/01)

DOCUMENT # B9400000361  1. Entity Name								
EXCEL YACHT CLUB LIMITED PARTNERSHIP					ED		•	<u>:</u>
Principal Place of Business 6255 BIRD ROAD MIAMI FL 33155		Mailing Address PO BOX 562438 SFCRFT		O1 JUL I SECRETAR' TALLAHASS	6 AM 8:4 Y OF STATE EE, FLORIDA	•		FA (188 <b>4 - 1</b> 880 - 18 <b>4</b> 1)
2. Principal Pl	ace of Business	3. Mailing Address	Mailing Address					##  {    <b>                               </b>
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DUE BY SEPTEMBER 26, 2001				
City & State		City & State		4. FEI Number	65-0517055		Applied For Not Applicable	
Zip Country		Zip	Country		5. Certificate of	f Status Desired		<b>5</b> Additional equired
	6. Name and Address of Current	Registered Agent		Name	7. Name and A	ddress of New R	egistered Agent	
ZULUETA, IGNACIO G				Street Address (P.O. Box Number is Not Acceptablé)				
6255 BIRD ROAD MIAMI FL 33155				diode / de				
MIMMI FE	35135				FL Zip Code			
8. The above	named entity submits this statement fo	ed office or registered agent, or both, in the State of Florida.						
SIGNATURE .	Signature, typed or printed name of registered agent			d Agent signature require	d when reinstating)	14 MAYE CHEC	DATE K PAYABLE TO C	SEDT OF STATE
9. Capital Co as Shown o	on record.	10. Amount of Cap in FLORIDA to	date.		<del></del>	SEE REVER	SE SIDE FOR FEE	
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS E Y NOT be changed on	NTITY M the form	IUST BE REGIS 1; an amendmei	TERED AND AC	to change a ge	eneral partner.	
12. GENERAL PARTNER INFORMATION DOCUMENT # K65519			13.	Т-	1=UF1	ADDRESS CHA	ANGES ONLY	
DOCUMENT # NAME STREET ADDRESS	EXCEL DEVELOPMENT CORPOR 6255 BIRD ROAD	ATION		EET ADDRESS			-	
CITY-ST-ZIP	MIAMI FL 33155			-ST-ZIP	<del>8000044879981</del>			
DOCUMENT # NAME .		الميونة أراد يعادران المعوجة أرايا	STRI	EET ADDRESS	·	-07/20/	/010108: <del>:0.00 ***</del>	3014
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14. I hereby a indicated the receive	certify that the information supplied with on this report is true and accurate and ver or trustee empowered to execute the	that my signature shall have is report as required by Cha	e tne sam apter 620.	emption stated in S e legal effect as if Florida Statutes BALAIS	ection 119.07(3)(i) made under oath;	, Florida Statutes. that I am a Genera	I further certify that Partner of the li	at the information mited partnership or
SIGNAT	ube: Signati			veloment (	ORA 7 12	٠ ١	3a5-60	2-2660
SIGNAL	UNL:	PRINTED NAME OF SIGNING GENE	HAL PARTN	ER Boner	1 Paris	Date	Daytime	Phone #

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