


APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	FILED 09 JUL 12 AM 9:12 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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DOCUMENT # B98000000 659

1. Name of Limited Partnership
Calypso ZAMIAS Limited Partnership

DO NOT WRITE IN THIS SPACE

2. Mailing Address <u>300 Market St</u>	3. Principal Office Address	4. Date Formed or Registered To Do Business in Florida	5. FEI Number <u>23-1818207</u>
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For
City & State <u>Johnstown PA</u>	City & State		Not Applicable
Zip <u>15901</u>	Country <u>USA</u>	Zip	Country

8a. Capital Contributions as Shown on Record 75

8b. Amount of Capital Contributions in FLORIDA to date: 75

FEES:

- Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
- Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
- Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent	10. If changed, new registered agent/office
<u>CT Corporation System 1200 South Pine Island Rd Plantation FL 33324</u>	Name HKE&F REGISTERED AGENT CORP.
	Street Address (P.O. Box Number is Not Acceptable) <u>2601 South Bayshore Drive</u>
	Suite, Apt. #, etc. <u>Suite 600</u>
	City <u>Miami</u>
	FL <u>33133</u>

10a. 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) Richard N. Krutzman DATE June 29, 1999

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration Document Number
<u>DAMIAN G. ZAMIAS</u>	<u>300 Market St</u>	<u>Johnstown PA 15901</u>	<u>400002930064--3</u> <u>-07/13/99--01060--001</u> <u>****641.25 ****641.25</u>

REINSTATEMENT 99

7-12-99

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 5/11/99

Typed or Printed Name of General Partner Signing Form DAMIAN G. ZAMIAS Telephone Number 814/535-3563

CR2E039 (12/98)