

2019 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000000631

Entity Name: MASTMI LIMITED PARTNERSHIP

Current Principal Place of Business:

923 S. TOWN AND RIVER DRIVE
FORT MYERS, FL 33919

Current Mailing Address:

923 S. TOWN AND RIVER DRIVE
FORT MYERS, FL 33919 US

FEI Number: 20-8928861

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAUM, HOWARD
12800 UNIVERSITY DRIVE
SUITE 275
FORT MYERS, FL 33907 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HOWARD BAUM

04/05/2019

Electronic Signature of Registered Agent

Date

General Partner Detail :

Document # L07000043875
Name MASTMI GP, LLC
Address 923 S. TOWN AND RIVER DRIVE
City-State-Zip: FORT MYERS FL 33919

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOWARD BAUM

REGISTERED AGENT

04/05/2019

Electronic Signature of Signing General Partner Detail

Date