

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000001155

**Entity Name:** KIRKMAN CENTER, LTD.

**Current Principal Place of Business:**

18205 BISCAYNE BOULEVARD  
#2202  
AVENTURA, FL 33160

**Current Mailing Address:**

18205 BISCAYNE BOULEVARD  
#2202  
AVENTURA, FL 33160

**FEI Number:** 65-1138183

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HALBERSTEIN, DANIEL  
18205 BISCAYNE BOULEVARD  
#2202  
AVENTURA, FL 33160 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**General Partner Detail :**

Document # P01000085029  
Name KIRKMAN CENTER, INC.  
Address 18205 BISCAYNE BOULEVARD, #2202  
City-State-Zip: AVENTURA FL 33160

*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:** DANIEL HALBERSTEIN

**GP**

**04/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date