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FORM. FILED
FEB 19 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A01000001593

1. Name of Limited Partnership
RM HOLLYWOOD HILLS PLAZA SHOPPING CENTER, LTD

2. Principal Office Address 3325 S. University Dr.		3. Mailing Office Address 3325 S. University Dr.	
Suite, Apt. #, etc. Suite 210		Suite, Apt. #, etc. Suite 210	
City & State Davie, FL		City & State Davie, FL	
Zip 33328	Country US	Zip 33328	Country US

4. Date Formed or Registered To Do Business in Florida	12/5/01
5. FEI Number	65-1157735
Applied For	Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status
7a. Capital Contributions as shown on Record:	\$100.00
7b. Amount of Capital Contributions in FLORIDA to date:	\$100.00

8. Name and Address of Current Registered Agent

Name
Barry Ross

Street Address (P.O. Box Number is Not Acceptable)
3325 S. University Drive.

Suite, Apt. #, Etc.
Suite 210

City Davie	State FL	Zip Code 33328
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FEES:

- 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.
- 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 (month) 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.

9. 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) _____ DATE 2-7-03

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

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Number(s))	City, State and Zip Code	10a. Registration Document Number
RM Hollywood Hills Plaza Shopping Center GP, LLC by Barry Ross, General Partner	3325 S. University Drive, Suite 210	Davie, FL 33328	L01000020834

REINSTATEMENT 02-03

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

11. 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)(j), 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 prepare this report as required by section 620, Florida Statutes.

SIGNATURE _____ DATE 2-7-03
Barry Ross, Manager Telephone Number (954) 452-5000

Typed or Printed Name of General Partner Signing Form _____

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
Fax Number : (850)205-0383

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Account Name : ADORNO & YOSS, P.A.
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Certificate of Status	0
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