

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 15 AM 9:22

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A02000000331

1. Name of Limited Partnership

Romeo Meadows, Ltd.

2. Principal Office Address

1172 S. Harbor Drive

Suite, Apt. #, etc.

City & State

Singer Island, FL

Zip

33404

Country

3. Mailing Office Address

1172 S. Harbor Drive

Suite, Apt. #, etc.

City & State

Singer Island, FL

Zip

33404

Country

CR2E039 (11/05)

4. Date Formed or Registered
To Do Business in Florida

03/08/02

5. FEI Number

80-0025249

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Alan I. Armour II

Street Address (P.O. Box Number is Not Acceptable)

1645 Palm Beach Lakes Blvd.

Suite, Apt. #, Etc.

Suite 1200

City

West Palm Beach

State

FL

Zip Code

33401

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records

9. Pursuant to the provisions of section 620.1810 or 620.1809, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

(REGISTERED AGENT MUST SIGN)

DATE

12/14/06

**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 Numbers)	City, State and Zip Code	10a. Registration Document Number
C.H. Consulting, Inc.	1172 S. Harbor Drive	Singer Island, FL 33404	P00000103016
Allen Heine	1172 S. Harbor Drive	Singer Island, FL 33404	

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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 exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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

Chris Heine

DATE

12/14/06

Typed or Printed Name of General Partner Signing Form

Chris Heine as President of C.H.

Telephone Number

(561) 722-9520

Consulting, Inc.