


A 02 0000005 70

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

04 OCT 25 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

<b>LIMITED PARTNERSHIP REINSTATEMENT</b>				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # A02000000570 1. Name of Limited Partnership HARDING VILLAGE, LTD. <i>10/1/04</i>					
2. Principal Office Address 155 South Miami Avenue Suite, Apt. #, etc. Suite 1150 City & State Miami, Florida Zip 33131		3. Mailing Office Address 155 South Miami Avenue Suite, Apt. #, etc. Suite 1150 City & State Miami, Florida Zip 33131		4. Date Formed or Registered To Do Business in Florida April 15, 2002	
Country USA		Country USA		5. FEI Number 75-3046681 Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$3.75 Additional Fee required for a Certificate of Status					
7a. Capital Contributions as shown on Record: \$99.00					
7b. Amount of Capital Contributions in FLORIDA to date: \$99.00					
8. Name and Address of Current Registered Agent Name: Maria Pellerin Barcus Street Address (P.O. Box Number is Not Acceptable): 155 South Miami Avenue Suite, Apt. #, Etc.: Suite 1150 City: Miami State: FL Zip Code: 33131					
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, of 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) <i>M. Barcus</i> DATE 10-20-04					
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) Harding Village, Inc.		Address of Each General Partner (Do NOT Use Post Office Box Numbers) 155 South Miami Ave. Suite 1150		City, State and Zip Code Miami, FL 33131	
				10a. Registration Document Number N02000002739 900042392669 11/02/04--01016--025 **\$50.00	
				900042392669 11/02/04--01016--026 **\$2.50	
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)(f), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(f) 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 <i>M. Barcus</i> DATE 10-20-04 Typed or Printed Name of General Partner Signing Form: Harding Village, Inc., General Partner Telephone Number: 305-371-8300					

By: Maria Pellerin Barcus, President