

# **2007 LIMITED PARTNERSHIP REINSTATEMENT**

DOCUMENT# A02000001080

**Entity Name:** BOLINA MANAGEMENT, LTD.

**FILED**  
**Feb 02, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

C/O JHONNY SALOMON, M.D. P.A.  
9055 SW 87TH AVENUE STE. 305  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JHONNY SALOMON, M.D. P.A.  
9055 SW 87TH AVENUE STE. 305  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 52-2370554      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

SALOMAN, JHONNY M  
9055 SW 87TH AVENUE STE. 305  
MIAMI, FL 33176      US

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

SALOMON, JHONNY M  
9055 SW 87TH AVENUE STE. 305  
MIAMI, FL 33176      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: JHONNY M. SALOMON

02/02/2007

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: SALOMON, JHONNY  
Address: 9055 SW 87TH AVENUE STE. 305  
City-St-Zip: MIAMI, FL 33176

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: JHONNY SALOMON

02/02/2007

Electronic Signature of Signing General Partner

Date