


2004 LIMITED PARTNERSHIP REINSTATEMENT

FILED
2004 DEC -2 PM 3:10
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # A03000001800		
1. Entity Name CATALINA FAMILY LIMITED PARTNERSHIP		

Principal Place of Business 1509 N. MILITARY TRAIL, SUITE 216 WEST PALM BEACH, FL 33409 US	Mailing Address 1509 N. MILITARY TRAIL, SUITE 216 WEST PALM BEACH, FL 33409 US
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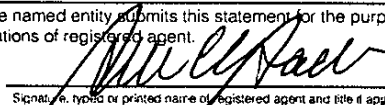
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



10192004 REIN-LP CR2E100 (6/04)

6. Name and Address of Current Registered Agent -DESANTIS, GASKILL, SMITH & SHENKMAN, P.A. ATTN: ROBERT HACKNEY, ESQUIRE 11891 U.S. HIGHWAY ONE, Suite 100 NORTH PALM BEACH, FL 33408		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named entity admits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  Robert C. Hackney DATE 10/19/04

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date. \$100.00	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P04000028930 CATALINA FAMILY PARTNERS, INC. 1509 N. MILITARY TRIAL, SUITE 216 WEST PALM BEACH, FL 33409	STREET ADDRESS CITY-ST-ZIP	
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REINSTATEMENT 2004
w/o penalty fees

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Albert Bay Jr., President 10/20/04 (S61) 35-2771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE