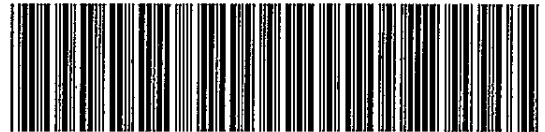


A04000001039

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(Requestor's Name)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



200037614242

07/02/04--01030--008 **25.00

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Registration Section
Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: PB Shores Holdings 1 Ltd.
(Name of Limited Partnership)

DOCUMENT NUMBER: A04000001039

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth Ratner
(Name of Person)

MR 44 RA LLC
(Firm/Company)

1407 Villa Juno Drive South
(Address)

North Palm Beach, FL 33408
(and Zip Code)

For further information concerning this matter, please call:

Kenneth Ratner at (561) 656-0962
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

FILED

1. The name of the limited partnership as identified in the records of the Florida Department of State:

PB Shores Holdings 1 Ltd

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Insert limited partnership's Florida document number:

A04000001039

or

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

PB Shores Holdings 1 LLLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office:
(if different from current recorded address):

1407 Villa Juno Drive South

North Palm Beach FL 33408

4. The street address of principal office in Florida:
(if different from above)

1407 Villa Juno Drive South

North Palm Beach FL 33408

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:

X as of the date this document is filed with the Florida Secretary of State

OR

_____ a date later than the time of filing: _____

7. The name and Florida street address of the partnership's agent for service of process:

1407 Villa Juno Drive South

North Palm Beach FL 33408

_____, Florida _____

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 29th day of June, 2004.

Signature of TWO Partners:

Patrick J. Marzano
Alan Tarpell

Typed or printed names of partners signing above:

Patrick Marzano

Alan Tarpell

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75