2005 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A04000001473

1. Entity Name
GOSPA FAMILY LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 NOV 15 AM 8:15

Principal Place of Business	Mailing Address
3452 WEST BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33436	3452 WEST BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33436

10202005 REIN-LP CR2E100 (8/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRESLEY, MICHAEL R ESQ. ~~701 NORTHPOINT PARKWAY, SUITE 220~~ ~~WEST PALM BEACH, FL 33407~~ 3452 W. Boynton Beach BLVD. Suite 5 Boynton Beach, Florida 33436	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 10/20/2005
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.
$5,000.00	$5000.00	

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 #		STREET ADDRESS	500061798945 11/30/05-01050-002 **141.25
NAME	GO, KA HOCK DY M.D.	CITY-ST-ZIP	
STREET ADDRESS	3452 WEST BOYNTON BEACH BLVD.		
CITY-ST-ZIP	BOYNTON BEACH, FL 33436		
DOCUMENT #		STREET ADDRESS	
NAME	GO, JEANNIE U M.D.	CITY-ST-ZIP	
STREET ADDRESS	3452 WEST BOYNTON BEACH BLVD.		
CITY-ST-ZIP	BOYNTON BEACH, FL 33436		
DOCUMENT #		STREET ADDRESS	AMENDED & RESTATED REINSTATEMENT 2005
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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: _____ M.D., G.P. 10/20/2005 561-732-1147
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Telephone #