

A94 000000 730

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A94 000000 730
1. Name of Limited Partnership
ELECTRONIC RESOURCES, LTD. *04*

2. Principal Office Address - No P.O. Box #
1800 NW 95TH AVE
3. Mailing Office Address
1800 NW 95TH AVE
City & State: MIAMI, FL
Zip & Country: 33172 EUA

8. Name and Address of Current Registered Agent
Name: SHTERENBERG, BERNARDO
Street Address (P.O. Box Number is Not Acceptable): 1800 NW 95TH AVE
City: MIAMI, State: FL, Zip Code: [blank]

4. Date Formed or Registered To Do Business in Florida: 05/27/1994
5. FEI Number: 650488631
6. CERTIFICATE OF STATUS DESIRED \$375 Additional Fee required for a Certificate of Status

7. FEES:
Filing Fee(s): \$411.25 for each year due this office.
Supplemental Fee(s): \$88.75 for each year due this office.
Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.
 A \$500 penalty is due for each year or part thereof the entity's Certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$500 penalty fee(s) be waived.

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.
SIGNATURE (Registered Agent Accepting Appointment): [Signature] DATE: [blank]
(REGISTERED AGENT MUST SIGN)

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
ER MIAMI GROUP, INC.	1800 NW 95th Ave.	MIAMI, FL	P94 000036036
<i>BK</i> REINSTATEMENT 2004-2009			

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 exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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 the report as required by Chapter 620, Florida Statutes.

SIGNATURE: [Signature] DATE: 08/24/2009
Typed or Printed Name of General Partner Signing Form: SHTERENBERG, BERNARDO Telephone Number: 205-592-8200