

2007 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A95000001674			
1. Entity Name 101 S.E. 27TH AVENUE, LTD.			
Principal Place of Business 101 SOUTHEAST 27TH AVENUE BOYNTON BEACH, FL 33435		Mailing Address 101 SOUTHEAST 27TH AVENUE BOYNTON BEACH, FL 33435	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



FILED

07 NOV 14 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11062007 REIN-LP CR2E100 (1/07)

4. FEI Number 65-0630028	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SCHREIBER, LAURIE 971 NORTHWEST 10TH COURT BOYNTON BEACH, FL 33426	7. Name and Address of New Registered Agent Name SAME AS # 6 Street Address (P.O. Box Number is Not Acceptable) 971 NW 10th Ct City Boynton Beach FL Zip Code 33426
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8. 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 Laurie Schreiber DATE NOV 1, 07
Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

FILE NOW!!! FEE IS \$500.00
After January 1, 2008, Fee will be \$1000.00

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	SCHREIBER, LAURIE	STREET ADDRESS	971 NW 10th Ct
NAME	101 SOUTHEAST 27TH AVENUE	CITY-ST-ZIP	Boynton Beach FL 33426
STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH, FL 33435		
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
CITY-ST-ZIP			

REINSTATEMENT

2007

~~11/09/07-01033-008 **500.00~~

~~100112174441~~
~~11/09/07-01033-008 **500.00~~

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Laurie Schreiber DATE NOV 1, 07 DAYTIME PHONE # 561-572-6206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE