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Florida Department of State
Division of Corporations
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LIMITED PARTNERSHIP REINSTATEMENT

QUAKERBRIDGE GOLDEN LAKES, LTD.

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A96000000624

1. Name of Limited Partnership
Quakerbridge Golden Lakes, Ltd.
REINSTATEMENT 2003-2005

2. Principal Office Address		3. Mailing Office Address	
2121 Ponce de Leon Blvd.		2121 Ponce de Leon Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
PH		PH	
City & State		City & State	
Coral Gables, Florida		Coral Gables, Florida	
Zip	Country	Zip	Country
33134	US	33134	US

4. Date Formed or Registered To Do Business in Florida: 04/01/1996

5. FEI Number: 65-0731993 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $5.00 Additional Fee to certify a Certificate of Status

7a. Capital Contributions as shown on Record: 1,000.00

7b. Amount of Capital Contributions in FLORIDA to date: 1,000.00

8. Name and Address of Current Registered Agent

Name: Registered Agents of Florida, LLC

Street Address (P.O. Box Number is Not Acceptable): 100 S.E. Second Street

Suite, Apt. #, Etc.: Suite 2900

City	State	Zip Code
Miami	FL	33131

FEES:
1) Filing Fee(s): Computed at a rate of $7 per $1,000 on amount entered in 7b, with a minimum filing fee of $52.50 and a maximum of $3437.50, for each year due this office.
2) Supplemental Fee(s): $86.75 for each year due this office, beginning with 1902 calendar year.
3) Penalty Fee(s): $500 penalty fee for each year report form is delinquent.
Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental addendum must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1081 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Charles J. Rennert, Vice President DATE 3/28/05

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
Cornerstone Golden, Inc.	2121 Ponce de Leon Blvd., PH	Coral Gables, FL 33134	P97000002077

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I hereby certify that the information supplied with this filing is truthful and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I knowledge the Division of Corporations from any liability or non compliance with Section 119.07(3)(i) in the event that my 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 effect as if made under oath; I further certify that I am a General Partner of the limited partnership, required to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE _____ DATE 3/25/05

Typed or Printed Name of General Partner Signing Form: Jorge Lopez, Vice President of GP Telephone Number: (305) 443-8288