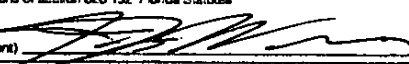
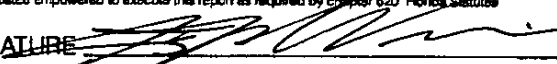


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # A96000001817			
1. Name of Limited Partnership 7211 LTD.			
2. Principal Office Address c/o Advance Development Corp		3. Mailing Office Address C/O Advance Development Corp.	
Suite Apt #, etc: 21034 Rosedown Ct.		Suite Apt #, etc: 1900 NW Corporate Blvd Ste 302 E	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33433	Country USA	Zip 33431	Country USA
4. Date Formed or Registered To Do Business in Florida 10/1/96			
5. FEE Number 650700678		Applied For ☐ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☒ \$4.75 Additional Fee required for a Certificate of Status			
7a. Capital Contributions as shown on Record: \$83,000.00			
7b. Amount of Capital Contributions in FLORIDA to date:			
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 \$437.50 for each year due this office. 2) Supplemental Fee(s): \$88.75 for each year due this office beginning with 1992 calendar year. 3) Penalty Fee(s): \$500 penalty fee for each year report form is due. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
8. Name and Address of Current Registered Agent Name Jeffrey J. Weiss Street Address (P.O. Box Number is Not Acceptable) 21034 Rosedown Ct. Suite Apt. # Etc City Boca Raton State FL Zip Code 33433			
9. Pursuant to the provisions of sections 620.1061 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 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)  DATE 12/1/05			
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
7211 Corp.	21034 Rosedown Ct.	Boca Raton, FL 33433	P96000080425
REINSTATEMENT 2000-2005 800062128258 12/13/05--01064--011 **\$15.50 000062128310 12/13/05--01064--012 **\$8.75			
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 exemption stated in Section 119.07(3)(c), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(c) 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 this report as required by chapter 620, Florida Statutes. SIGNATURE  DATE 12/1/05 Typed or Printed Name of General Partner Signing Form _____ Telephone Number _____			