

**A9600002448**

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 OCT 27 AM 9:31

W/1/03

**LIMITED PARTNERSHIP REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # A9600002448

1. Name of Limited Partnership

MINNESOTA HEIGHTS, LTD.

**REINSTATEMENT 2003**

2. Principal Office Address

375 GRAY ROAD

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. BOX 928

Suite, Apt. #, etc.

4. Date Formed or Registered To Do Business in Florida

12/24/1996

5. FEI Number

59-3415776

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$6.75 Additional Fee required for 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

City & State

MELBOURNE, FL

City & State

CAPE CANAVERAL, FL

Zip Country  
32904 USA

Zip Country  
32920 USA

8. Name and Address of Current Registered Agent

Name

STRAKA, CHRISTOPHER J.

Street Address (P.O. Box Number is Not Acceptable)

375 GRAY ROAD

Suite, Apt. #, Etc.

City

MELBOURNE

State  
FL

Zip Code  
32904

9. Pursuant to the provisions of sections 620.1059 and 620.102, 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)

DATE 09/19/2003

**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)

M.H. PARTNERS GROUP I, INC.

Address of Each General Partner (Do NOT Use Post Office Box Numbers)

375 GRAY ROAD

City, State and Zip Code

MELBOURNE, FL 32904

10a. Registration Document Number

P96000103205

**REINSTATEMENT 2003**

800023575328  
10/09/03--01075--017 \*\*650.00

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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 file this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 09/19/2003

Typed or Printed Name of General Partner Signing Form

M.H. PARTNERS GROUP, INC.

Telephone Number

(321) 749-4900

CG2003 (10/02)