01/06/2004 13:50 PHILLIPS EISINGER → 3056612289 NO.622 P002

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PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR -2 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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03/18/04--01019--003 **3078.75

DOCUMENT # A97000000846

1. Name of Limited Partnership
SHOPS OF COOPER CITY, LTD.

2. Principal Office Address	3. Mailing Office Address
1320 S. DIXIE HWY	3308 NE 32ND STREET
Suite, Apt. #, etc. SUITE 781	Suite, Apt. #, etc.
City & State CORAL GABLES, FL	City & State FT. LAUDERDALE, FL
Zip 33146 / Country MIAMI-DADE	Zip 333308 / Country BROWARD

4. Date Formed or Registered To Do Business in Florida 04/16/1997

5. FEI Number 65-0782923 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7a. Capital Contributions as shown on Record: $550,000.00

7b. Amount of Capital Contributions in FLORIDA to date: $550,000.00

8. Name and Address of Current Registered Agent

Name: GARY L. BROWN, ESQ.
Street Address (P.O. Box Number is Not Acceptable): 4000 HOLLYWOOD BLVD.
Suite, Apt. #, Etc.: SUITE 265-S
City: HOLLYWOOD State: FL Zip Code: 33021

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): $86.75 for each year due this office, beginning with 1992 calendar year.
3.) Penalty Fee(s): $500 penalty fee for each year report form is delinquent.
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.

CR2E036 (01/03)

9. Pursuant to the provisions of sections 620.1051 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 _____

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
SHOPS OF COOPER CITY, G.P., INC.	1320 S. DIXIE HIGHWAY, SUITE 781	CORAL GABLES, FL 33146	P97000034407

2002-2004

REINSTATEMENT

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 execute this report as required by chapter 620, Florida Statutes.

SIGNATURE _____ DATE 1/19/05

Typed or Printed Name of General Partner Signing Form: Scott Greenfield Telephone Number: 305-667-2225