BEFORE COMPLETING THIS FORM.



SECRETARY OF STATE

PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF STA Secretary of State DIVISION OF CORPORATIONS	THE PORT OF CORP	OLVISION OF CORPORATIONS 04 JAN 27 PM 2: 20	
DOCUMENT # A970000 1. Name of Limited Partnership	1		~	
Lehre Family Investment 6.,			- 037 002 \$ 526 ²⁵	
2. Principal Office Address 936 Jutiawadal Dr.	3. Mailing Office Address 2100 5- wmmhulal Mh	<u> </u>	9/2/1997 =	
Suite, Apt. #, etc. 2 - C	Suite, Apt. #, etc.	5. FEI Number 6.0)77556 6. CERTIFICATE OF STATUS DESIRED	Applied For Not Applicable S8.75 Additional Fee requirec	
Zip Country Zip Country			7a. Capital Contributions as shown on Record:	
33308 USA 33308 USA 8. Name and Address of Current Registered Agent		7b. Amount of Capital Contributions is 930, 865	7b. Amount of Capital Contributions in FLORIDA to date:	
Street Address (P.O. Box Number is Not Acceptable)		1.) Filing Fee(s): Computed at a rate of in 7b, with a minimum filing fee of \$5 for each year due this office.	S: \$7 per \$1,000 on amount entered	
Suite, Apt. #, Etc.		Supplemental Fee(s): \$88.75 for each with 1992 calendar year. Penalty Fee(s): \$500 penalty fee for Note: If the amount entered in 7b is	each year report form is delinquent	
City (K-Lande dale	State Sip Code	7a, a supplemental affidavit must be and appropriate filing fee.	submitted along with a separate	
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)				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY				
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	
Theodor Lehrer, Trustee	2100 E. Commercial Blvd.	Ft. Laudendale, FL	NA	
		02/02/0401030- 1 000280 02/02/0401030-	-001 **526.25 0.25.71 -001 **526.25	
		nstatement d	03.204	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
11.—) 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 cath. 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 Third Mun DATE 1-06 04				
Typed or Printed Name of General Partner Signing Form THEODOR (EHREK Telephone Number 914.77.2.0933)				



2082 Foxel 6 850 410 1015

January 23, 2004

Brenda Talock Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re: Lehrer Family Investment company FIN #650777556

As we discussed today, I did not receive the 2003 Uniform Business Report form on time. Probably it got lost in the mail and made its way to me after May 1, 2003. I always pay my bills within days of receipt.

I would greatly appreciate it if you would rebate the \$400.00 late file.

Endorse please find my payment for year 2004.

Thank you,

Sincerely

Theodor Lehrer, M.D.,

Theodor When