

Jun-30-2000 09:39 From-CENTRES INC
Division of Corporations

T-119 P.001/002 F-876

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To: Division of Corporations
Fax Number : (850) 922-4003

From: Account Name : CENTRES, INC.
Account Number : I19990000140
Phone : (305) 670-1997
Fax Number : (305) 670-4429

RECEIVED
00 JUN 30 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT

OAKLAND PARK C/T LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,291.25

AGA-1579
6-30
06/29/2000

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

 FLORIDA DEPARTMENT OF STATE Secretary of State TALLAHASSEE, FLORIDA		00 JUN 30 AM 10:01 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # A98000001579			
1. Name of Limited Partnership Oakland Park C/T Limited Partnership			
2. Principal Office Address 9130 S. Dadeland Blvd. Suite, Apt. #, etc. Suite 1528 City & State Miami, Florida Zip 33156		3. Mailing Office Address 9130 S. Dadeland Blvd. Suite, Apt. #, etc. Suite 1528 City & State Miami, Florida Zip 33156	
4. Date Formed or Registered To Do Business in Florida 6/29/98		5. FEI Number 39-1935314	
6. CERTIFICATE OF STATUS DESIRED ☒		\$8.75 Additional Fee required for a Certificate of Status	
7a. Capital Contributions as shown on Record \$5,000		7b. Amount of Capital Contributions in FLORIDA to date \$5,000	
8. Name and Address of Current Registered Agent Name Oakland Park C/T, Inc. Street Address (P.O. Box Number is Not Acceptable) 9130 S. Dadeland Blvd. Suite, Apt. #, Etc. Suite 1528 City Miami			
State FL Zip Code 33156			
9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the undersigned 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, within the State of Florida. Such change was authorized by its general partner(s) and 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) <i>Arnold D. Shevin</i> Sr. Vice President 6/29/00			
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) Oakland Park C/T, Inc.		10a. Registration Document Number P98000056726	
Address of Each General Partner (Do NOT use Post Office Box Numbers) 9130 S. Dadeland Blvd.		City, State and Zip Code Miami, FL 33156	
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)(x) Florida Statutes. I release the Division of Corporations from any liability for non-compliance with Section 119.07(3)(x) in the event that the information supplied is omitted, excluded from public access. I further certify that the information I have also on this annual report is true and accurate and that my signature shall have the same legal effect as if I were 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 <i>Arnold D. Shevin</i> Arnold D. Shevin, Sr. Vice President		DATE 6/29/00	
Typed or Printed Name of General Partner Signing Form Oakland Park C/T, Inc.		Telephone Number (305) 670-1997	