A99000000053

APPROVED AND FILED

1062

H03000302173

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

03 OCT 23 AM 9:59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 2003

DOCUMENT # A99000000053

1. Name of Limited Partnership
Professional Center Partners, Ltd.

2. Principal Office Address: 1380 NE Miami Gardens Drive
Suite, Apt. #, etc.: Ste 250
City & State: North Miami Beach, FL
Zip: 33179 Country: USA

3. Mailing Office Address: 1380 NE Miami Gardens Dr
Suite, Apt. #, etc.: Ste 250
City & State: North Miami Beach, FL
Zip: 33179 Country: USA

4. Date Formed or Registered To Do Business in Florida

5. FEI Number: 65-1040953 ☐ 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: $5,000

7b. Amount of Capital Contributions in FLORIDA to date:

8. Name and Address of Current Registered Agent
Name: Paul Fraynd
Street Address (P.O. Box Number is Not Acceptable): 1380 NE Miami Gardens Drive
Suite, Apt. #, Etc.: Ste 250
City: North Miami Beach State: FL Zip Code: 33179

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.

9. Pursuant to the provisions of sections 620.1?? 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 as registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) [signature] DATE 10/22/03

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
Professional Center, Inc.	1380 NE Miami Gardens Dr. #250	North Miami Beach, FL 33179	P99000011330

10/23/03

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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 noncompliance 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 effect 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 [signature] DATE 10/22/03

Typed or Printed Name of General Partner Signing Form: Paul Fraynd Telephone Number (305) 940-5046

10/22 '03 15:25 NO.946 02/02 850 222 1222 CAPITAL CONNECTION

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Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

LIMITED PARTNERSHIP REINSTATEMENT

PROFESSIONAL CENTER PARTNERS, LTD.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	$650.00

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