DATE ___12/16/04

Telephone Number _

2004-2005

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.			
LIMITED PARTNERSHIP REINSTATEMENT	LORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 05 JAN -6 PM 2: 18 SERVETARY OF STATE TALLAHASSEE FLORIDA
DOCUMENT # A9900000055 1. Name of Limited Partnership			TALLAHASSEE FLUNDA
Rahway Group, Ltd.			1/4
Principal Office Address 22.1 Brickell Avenue 3. Mailing Office Address 122.1 Brickell Avenue		4. Date Formed or Registered To Do Business in Florida	
uite, Apt. #, etc. c/o Paul Berkowitz Suite, Apt. #, etc. c/o Paul Berkowitz		5. FEI Number Applied For 65-0886040 Not Applicable	
y & State Miami, Florida City & State Miami, Florida		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required sector a Certificate of Status 45	
Zip Country 33131 USA	Zip 33131	Country	7a. Capital Contributions as shown on Record: 750,000.00
8. Name and Address of Current Registered Agent			750,000.00
Paul Berkowitz, Esq. Street Address (P.O. Box Number is Not Acceptable) c/o Greenberg Traurig, P.A., 1221 Brickell Avenue Suite, Apt. #, Etc. City Miami State Zip Code 33131			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 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.
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 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. Floride Statutes. SIGNATURE (Registered Agent Accepting Appointment)			
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 (Do NOT Use Post C	General Partner	City, State and Zip Code 10a. Registration Document Number
Rahway Group, Iñc.	9264 Vista De #24-A	el Lago, B	oca Raton, FL 33428 P98000106236 P98000106236 P98000106236 P98000106236 P98000106236 P98000106236 P98000106236
		12.27.37 1.27.27.37 1.27.27.37.37.37.37.37.37.37.37.37.37.37.37.37	900044792439 01/14/0501046023 000/5
Note: Conoral narrows MAY NOT	he changed on th	lo formu on ornar	WD PLUATS

I do hereby ceruly that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. Frelease the Division of Corporations from any Fability of non-compliance with Section 119.07(3)(1) in the event that the information supplied is deemed exempt from public access. Further certify that the information indicated on this annual report is true are 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 tenor as certified. Statutes.

RAHWAY. CROUP.

Maureen H. Berkowitz, Vice President

SIGNATURE _

Typed or Printed Name of General Partner Signing Form