


3087.50

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
05 MAY - 2 AM 11:26  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

<b>LIMITED PARTNERSHIP REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> A99000001318			
<b>1. Name of Limited Partnership</b>  WARD ENTERPRISES LTD., PARTNERSHIP			
<b>2. Principal Office Address</b> 126 Caribbean Key Suite, Apt. #, etc.  City & State Key Largo, FL  Zip Country 33037 U.S.A.		<b>3. Mailing Office Address</b> 126 Caribbean Key Suite, Apt. #, etc.  City & State Key Largo, FL  Zip Country 33037 U.S.A.	
<b>4. Date Formed or Registered To Do Business in Florida</b> 08/06/1999		<b>5. FEI Number</b> <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>			
<b>7a. Capital Contributions as shown on Record:</b> \$250,000.00			
<b>7b. Amount of Capital Contributions in FLORIDA to date:</b> \$250,000.00			
<b>FEES:</b> 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.			
<b>8. Name and Address of Current Registered Agent</b> Name John S. Bohatch, Esquire Street Address (P.O. Box Number is Not Acceptable) 2600 Douglas Road, Penthouse 8 Suite, Apt. #, Etc.  City State Zip Code Coral Gables FL 33034			
<b>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.</b>  SIGNATURE (Registered Agent Accepting Appointment) _____ DATE 4/8/2005			
<b>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b>			
<b>10. Name(s) of General Partner(s)</b>	<b>Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b>	<b>City, State and Zip Code</b>	<b>10a. Registration Document Number</b>
Ward of South Florida, Inc.	126 Caribbean Key	Key Largo, FL 33037	P99000070299
<b>REINSTATEMENT 2003-2005</b> 700053639507 05/03/05--01024--001 **3140.00			
<b>Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.</b>			
<b>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.</b>			
<b>SIGNATURE</b> _____		<b>DATE</b> April 28, 2005	
Typed or Printed Name of General Partner Signing Form: Joe Ward		Telephone Number: 305-442-4911	

CR2E039 (10/02)