A99000001822

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

04 MAR -5 PM 5:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A99000001822

1. Name of Limited Partnership
CENTENNIAL PARTNERS, LTD.

2. Principal Office Address	3. Mailing Office Address
6278 N. Federal Highway	6278 N. Federal Highway
Suite, Apt. #, etc.: 302	Suite, Apt. #, etc.: 302
City & State: Fort Lauderdale, FL	City & State: Fort Lauderdale, FL
Zip: 33308 Country: US	Zip: 33308 Country: US

4. Date Formed or Registered To Do Business in Florida: 11/05/1999

5. FEI Number: 65-0960428 ☐ 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: $2,700,000

7b. Amount of Capital Contributions in FLORIDA to date: $2,700,000

8. Name and Address of Current Registered Agent

Name: ROBERT S. FORMAN, ESQUIRE

Street Address (P.O. Box Number is Not Acceptable): 2101 West Commercial Blvd.

Suite, Apt. #, Etc.: 4100

City: Fort Lauderdale State: FL Zip Code: 33309

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): $86.75 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 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) _____ DATE 2/3/04

CR2E039 (10/02)

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
Centennial Atlanta, Inc.	6278 N. Federal Highway, Suite 302	Fort Lauderdale, FL 33308	P99000096877

100030681851
03/18/04--01011--001 **526.25
100030681851
03/18/04--01011--002 **526.25

REINSTATEMENT 2003-2004

BK

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 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.

SIGNATURE _____ DATE 2/3/04

Typed or Printed Name of General Partner Signing Form: Kenneth L. Shimm, President Telephone Number: (954) 492-1980

H99000001822

LAW OFFICES
ROBERT S. FORMAN, P.A.
SUITE 4100
2101 WEST COMMERCIAL BOULEVARD
FORT LAUDERDALE, FLORIDA 33309

ROBERT S. FORMAN
MARK J. LYNN

OF COUNSEL
VINCENT J. ALTINO, P.A.
BERMAN & KEAN, P.A.

TELEPHONE (954)735- 0000
TELEFAX (954) 735-3636

(2)

FILED
04 MAR -5 PM 5:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 3, 2004

Department of State
409 East Gaines Street
Tallahassee, FL 32399

RE: Reinstatement of Centennial Partners, Ltd.

Gentlemen:

Enclosed please find Reinstatement Form for Centennial Partners, Ltd., together with Robert S. Forman, P. A. Trust Account Check No.: ___, payable to Department of State, in the sum of $526.25 representing the reinstatement fee. Our client never received their Uniform Business Report for 2003 and is hereby requesting that the late fee be waived.

If you have any questions regarding the enclosed, please do not hesitate to contact our office.

Very truly yours,

Jean Seibold

JEAN SEIBOLD
/js
Encls. as stated above