

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

B02000000096

FILED
OCT 28 PM 4:18
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **B02000000096**

1. Name of Limited Partnership
METRA WINDSOR TOWER, L.P.

2. Principal Office Address
c/o Third Millennium Group
Suite, Apt. #, etc.
7700 Congress Avenue, Ste 3106
City & State
Boca Raton, Florida
Zip Country
33487 Palm Beach

3. Mailing Office Address
same as #2
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Formed or Registered To Do Business in Florida
Mach 25, 2003

5. FEI Number
01-0617003
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:
0.00

7b. Amount of Capital Contributions in FLORIDA to date:
0

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.

8. Name and Address of Current Registered Agent
Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City State Zip Code
Tallahassee FL 32301

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) Brian Courtney Asst. V. Pres DATE 10/24/03

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
Metra Windsor Tower GP, LLC	c/o Third Millennium Group 7700 Congress Avenue, Suite 3106	Boca Raton, FLorida 33487	M02000000770
REINSTATEMENT 2003			500024212745

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 Stephan Guez DATE October 13, 2003
Typed or Printed Name of General Partner Signing Form STEPHAN GUEZ Telephone Number (561) 995-7955

CR2E039 (10/02)



CORPORATION SERVICE COMPANY

B02000000096

ACCOUNT NO. : 072100000032

REFERENCE : 287214 7372082

AUTHORIZATION : *Patricia Pizoto*

COST LIMIT : \$ 641.25

ORDER DATE : October ²⁸ 20, 2003

ORDER TIME : 9:57 AM

ORDER NO. : 287214-040

CUSTOMER NO: 7372082

CUSTOMER: Simon Mizrachi
The Mid-atlantic Agency
Suite 3106
7700 Congress Avenue
Boca Raton, FL 33487

MP

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03 OCT 28 PM 11:18
TALLAHASSEE, FLORIDA

REINSTATEMENT

NAME: METRA WINDSOR TOWER, LP

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS _____

RECEIVED
03 OCT 28 PM 12:46
DIVISION OF CORPORATION