

2007 LIMITED PARTNERSHIP REINSTATEMENT

FILED

2007 MAR 27 AM 9:18

SECRETARY OF STATE



03202007 REIN-LP CR2E100 (1/07)

4. FEI Number **42-1681371** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STOLTZ, MORRIS L II
301 YAMATO RD., STE. 3101
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

DATE

FILE NOW!!! FEE IS \$1000.00

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **F05000005978**
NAME **MIZNER COURT, INC.**
STREET ADDRESS **301 YAMATO RD., STE. 3101**
CITY-ST-ZIP **BOCA RATON, FL 33431**

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP

400095893814
04/03/07--01051--019 **1000.00

REINSTATEMENT 06-07

FILED
2007 MAR 27 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/22/07

Date

Daytime Phone #

STAPLE CHECK HERE