

10/2 Oct. 22, 2003 11:39AM

PROPERTY SERVICES, INC. WHITE

No. 5059 2/23

B9800000515

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT****FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 23 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT #****1. Name of Limited Partnership**Lighthouse Cove Apartments Limited
Partnership13001024283829
10/23/03-01023--025 **1026.25**2. Principal Office Address**

1320 South Dixie Hwy.

3. Mailing Office Address

1320 S. Dixie Hwy.

Suite, Apt., v. etc.

Suite 781

Suite, Apt., v. etc.

Suite 781

City & State

Coral Gables, Fl.

City & State

Coral Gables, Fl.

Zip

33146

Country

U. S.

Zip

33146

Country

U. S.

**4. Date Formed or Registered
To Do Business in Florida****5. P.O. Number**

65-0857969.

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

Not Applicable (See Instructions)

7a. Capital Contributions to General Partner

\$4,000,000.00

7b. Amount of Capital Contributions in FLORIDA to date:**8. Name and Address of Current Registered Agent****Name**

Sterling Fin @ mgmt. Inc.

Street Address (P.O. Box Number is Not Acceptable)

2880 Scherer Dr. Suite 840

Suite, Apt., v. etc.

Attn: Shelley A. Chew

City

Saint Petersburg

State

FL

Zip Code

33716

FEES:

1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$28.00 and a maximum of \$497.00, for each year since this office.

2) Supplemental Fee: \$50.75 for each year since this office, beginning with 1983 calendar year.

3) Penalty Fee: \$100 penalty fee for each year since this office.

Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate fee appropriate filing fee.

9. Pursuant to the provisions of sections 620.10(1) and 620.102, 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 my appointment as registered agent. I am familiar with, and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

P. Chen, v.p.

DATE

10/22/03

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10a. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use P.O. Box Numbers)	City, State and Zip Code	10b. Registration Document Number
Allen R. Greenwald	1320 S. Dixie Hwy Suite 781	Coral Gables, Fl. 33146	

REINSTATEMENT 2-003

BKC

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I am hereby certifying that the information supplied with this filing is accurately furnished and does not conflict with the information entered in Section 11.007(2)(b), Florida Statutes. I release the Division of Corporations from any liability or non-liability with Section 11.007(2)(b) in the event that the information supplied is outdated, incorrect, or false. I further certify that the information furnished on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee authorized to execute this report as required by section 620.102, Florida Statutes.

SIGNATURE

Allen Greenwald

DATE

10/20/03

Typed or Printed Name of General Partner Signing Form

Allen Greenwald

Telephone Number

305-667-4856