

A9500001065

A

DOUMAR, CURTIS, CROSS, LAYSTROM & PERLOFF
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

RAYMOND A. DOUMAR, P.A.
CHARLES L. CURTIS, P.A.
WILLIAM S. CROSS, P.A.
C. WILLIAM LAYSTROM, JR., P.A.
JOHN W. PERLOFF, P.A.

1177 SOUTHEAST THIRD AVENUE
FORT LAUDERDALE, FLORIDA 33306-1807
BROWARD (305) 525-3441
MIAMI (305) 945-3172
TELEFAX (305) 525-3423

E. SCOTT ALLEWORTH, P.A.
JOHN D. VOIGT, P.A.
JEFFREY S. WACHS, P.A.
MARK E. ALLWORTH, P.A.
STUART J. MACIVER, P.A.
RUBBELL L. FORNEY, P.A.

*ALSO ADMITTED IN MICHIGAN
*BOARD CERTIFIED REAL ESTATE LAWYER

*ALSO ADMITTED IN PENNSYLVANIA

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

July 3, 1995

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

~~300001532833~~
300001532833
-07/07/95-01093-001
***140.00 ***140.00

Re: Certificate of Limited
Partnership of GORI FAMILY
LIMITED PARTNERSHIP

95 JUL -7 PM 1:55
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Gentlemen:

Enclosed please find the Certificate of Limited Partnership of the Gori Family Limited Partnership, Acceptance of Appointment as Registered Agent and Affidavit of Capital Contributions.

In addition, also enclosed is our check in the amount of \$140.00 which is comprised of:

A. \$87.50 - registration of registered agent and filing fee for \$5,000 of contributions; and

B. \$52.50 - certified copy of Certificate of Limited Partnership.

A self addressed stamped envelope is also enclosed for your convenience in returning the certified copy of the Certificate of Limited Partnership.

If any additional information is required, please do not hesitate to contact me. Thank you for your courtesies in this matter.

Very truly yours,

Jeffrey S. Wachs
Jeffrey S. Wachs
For the firm

\$15,000

JSW:lb
Enclosure

Name	<i>Wachs</i>
Availability	<i>Wachs</i>
Date	<i>7/14/95</i>
Examiner	<i>Wachs</i>
Updater	<i>Wachs</i>
Verifier	<i>Wachs</i>
Acknowledgement	<i>Wachs</i>
W. P. Verifier	<i>Wachs</i>

FILING	52.50
C. COPY	52.50
R. AGENT	35.00
TOTAL	140.00
BALANCE DUE \$	
REFUND \$	

Wachs 7/7/95

7/14

CERTIFICATE OF LIMITED PARTNERSHIP
OF
THE GORI FAMILY LIMITED PARTNERSHIP

THE UNDERSIGNED, constituting the General Partner of THE GORI FAMILY LIMITED PARTNERSHIP, a Florida Limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. Name of the Partnership.

THE GORI FAMILY
LIMITED PARTNERSHIP

2. The address of the office of the Partnership is.

1728 N.E. 23rd Avenue
Fort Lauderdale, FL 33305

3. Name and addresses of the agent for the service of process on the Partnership is.

JEFFREY S. WACHS, ESQ.
1177 S.E. 3rd Avenue
Fort Lauderdale, FL 33316

4. Name and business address of the General Partner is.

P.G. INVESTMENTS, INC.
1728 N.E. 23rd Avenue
Fort Lauderdale, FL 33305

(95000050950)

FILED
5 JUL -7 PM 1:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5. Mailing address of the Partnership is.

THE GORI FAMILY LIMITED
PARTNERSHIP
c/o P.G. Investments, Inc.
General Partner
1728 N.E. 23rd Avenue
Fort Lauderdale, FL 33305

6. Latest date upon which the Partnership will dissolve.

Will be in accordance with Section 620.157
of the Florida Statute, however, no later than
December 31, 2020.

The execution of this Certificate by the undersigned General
Partner constitutes an affirmation under penalties of perjury that
the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned has duly executed this
Certificate of Limited Partnership of THE GORI FAMILY LIMITED
PARTNERSHIP, this 30th day June, 1995.

GENERAL PARTNER:

P.G. INVESTMENTS, INC.


By: PHILLIP T. GORI, President

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for **THE GORI FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership ("Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership agree to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:

Jessie S. Wachs

JESSIE S. WACHS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 JUL -7 PM 1:36

FILED

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared PHILLIP T. GORI, the President of P.G. INVESTMENTS, INC., the General Partner of THE GORI FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, herein referred to as the "Partnership", who, upon being duly sworn, certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the Limited Partners is as follows:

\$5,000.00

2. The amount of capital contributions anticipated to be contributed by additional Limited Partners is as follows:

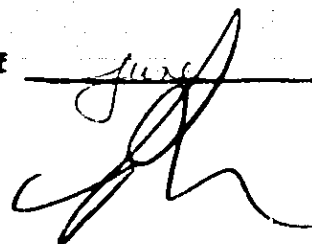
NONE

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

DATED this 20th day of June



PHILLIP T. GORI

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
JUL - 7 1995
1:35
FILED

STATE OF FLORIDA)
COUNTY OF BROWARD) SS:

SWORN TO AND SUBSCRIBED before me, the undersigned authority,
by PHILLIP T. GORI, President and who appeared personally before
me and took an oath, who is personally known to me or who produced
his Florida-drivers license as identification,
on this 30th day of June, 1995.

Lisa D. Belenson
Notary Public, State of Florida
Print Name: Lisa D. Belenson
My Commission Number: CC399213
My Commission Expires: 8/10/98



LISA D. BELENSON
COMMISSION # CC 399213
EXPIRES AUG 10, 1998
BONDED THRU
ATLANTIC BONDING CO., INC.

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

66 MAR 25 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001065

THE GORI FAMILY LIMITED PARTNERSHIP

2. New Mailing Address, If Applicable

Suite, Apt #, etc

City, State & Zip

700001762377

03/29/96 01028 021

2a. New Principal Office

***19125 ***191.25

Suite, Apt #, etc

City, State & Zip

Mailing Address

**P.G. INVESTMENTS, INC., GENERAL PARTNER
1720 NE 23RD AVE.
FT. LAUDERDALE FL 32618**

Principal Office Address

**1720 NE 23RD AVE.
FT. LAUDERDALE FL 32605**

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
07/07/1985

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown on Record
\$5,000.00

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1.) Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$457.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.183, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

**WACHS, JEFFREY S ESQUIRE
1177 SE 3RD AVE.
FT. LAUDERDALE FL 33316**

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt #, etc

City

Zip Code

FL

10a. 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

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

P.G. INVESTMENTS, INC.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

1720 NE 23RD AVE.

11b. City, State & Zip Code

FT. LAUDERDALE FL 333

11c. Registration Document Number

P000000000

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

12. 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)(k) Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119 07(3)(k) 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

3-19-96

Typed or Printed Name of General Partner Signing Form

Philip T. Gori

Telephone Number

352-566-0323

CR2E03 (6/95)