

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 MAR 25 AM 9:24

LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A00000001297

1. Name of Limited Partnership

2048 Limited Partnership

8002460446612
03/25/13--01005--011 **30001.00

2. Principal Office Address - No P.O. Box #
3598 YACHT CLUB DRIVE

3. Mailing Office Address

Suite, Apt. #, etc.
Apt #1703

Suite, Apt. #, etc.

City & State
AVENTURA FL

City & State

Zip Country
33180 US

Zip Country

4. Date Formed or Registered
To Do Business in Florida 08/18/2000

5. FEI Number 65-1033470

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
Rosalyn Kaplus

Street Address (P.O. Box Number is Not Acceptable)
3598 Yacht Club Drive

Suite, Apt. #, Etc.
Apt. #1703

City FL Zip Code
Aventura 33180

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records.

E-mail Address:

rkaplus@ix.netcom.com

E-Mail address to be used for future annual report notices.

9. 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 (Registered Agent Accepting Appointment)

Rosalyn Kaplus

DATE 3/18/13

(REGISTERED AGENT MUST SIGN)

**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

Rosalyn Kaplus

3958 Yacht Club Drive, #1703 Aventura, FL 33180

Lauren Kaplus

33 Pond Avenue #1103 Brookline, MA 02445

REINSTATEMENT

MAR 25 2013

R. HUNT

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 exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE

Rosalyn Kaplus

DATE

3/18/13

Typed or Printed Name of General Partner Signing Form

Rosalyn Kaplus

Telephone Number

305431-1220