A04656

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A04656

1. Name of Limited Partnership

SKG- FLORIDA LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

2. Mailing Address	3. Principal Office Address
c/o KIN PROPERTIES INC	c/o KIN PROPERTIES INC
Suite, Apt. #, etc. 77 TARRYTOWN ROAD	Suite, Apt. #, etc. 77 TARRYTOWN ROAD
City & State WHITE PLAINS, NY	City & State WHITE PLAINS, NY
Zip 10607 Country USA	Zip 10607 Country

4. Date Formed or Registered To Do Business in Florida: 12/24/1975

5. FEI Number: 04-2583783 Applied For / Not Applicable

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

7. State or Country of Formation: MA

8a. Capital Contributions as Shown on Record: NONE

8b. Amount of Capital Contributions in FLORIDA to date: NONE

FEES: 1.) Filing Fee(s) Computed at a rate of $7 per $1,000 or amount entered in 8b, with a minimum filing fee of $52.50 and a maximum of $437.50 for each year due this office
2.) Supplemental Fee(s) $103.75 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 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee

9. Name and Address of Current Registered Agent

CARNEY, MARY JO
POWELL CARNEY & MOORE, P.A.
360 CENTRAL AVE., FLORIDA FEDERAL TOWER
ST. PETERSBURG FL 33701

10. If Changed, New Registered Agent/Office

Name
Street Address (P.O. Box Number Not Acceptable)
Suite, Apt. #, etc.
City

500002778535--6
-02/17/99--01084--001
***1423.75 ***1423.75
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 as 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration/ Document Number
SANRIDGE COMPANY, INC	c/o KIN PROPERTIES INC 77 TARRYTOWN ROAD	WHITE PLAINS, NY	~~PENDING~~ F99000000353

PER Amendment filed 2/16/99.

CANCELLED 11/18/99

Postmarked 12/30/98

CR2EC39 (1/97)

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 Wayne Feldman DATE 12/29/98

Typed or Printed Name of General Partner Signing Form WAYNE FELDMAN, TREASURER, SANRIDGE COMPANY Telephone Number 914-683-8080 x 181