

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED  
PARTNERSHIP  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

2007 MAR 12 AM 10:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # A05000000781**

**1. Name of Limited Partnership**

ALEKSANDR GORBACH - FAMILY LIMITED PARTNERSHIP

**2. Principal Office Address**

761 SE PORTAGE Ave

Suite, Apt. #, etc.

City & State

PORT St. Lucie FL

Zip

34984

Country

PORT St. Lucie

**3. Mailing Office Address**

761 SE PORTAGE Ave

Suite, Apt. #, etc.

City & State

PORT St. Lucie FL

Zip

34984

Country

PORT St. Lucie

CR2E039 (11/05)

**4. Date Formed or Registered  
To Do Business in Florida**

APR. 20/2005

**5. FEI Number**

20-2729458

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

ALEKSANDR GORBACH

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

761 SE PORTAGE Ave

Suite, Apt. #, Etc.

N/A

City

PORT St. Lucie

State

FL

Zip Code

34984

**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

**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 630, Florida Statutes.**

SIGNATURE (Registered Agent Accepting Appointment)

Aleksandr Gorbach

DATE

N/A

(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**

Aleksandr Gorbach

761 SE PORTAGE  
Ave

PORT St. Lucie  
FL. 34984

N/A.

500092638846

03/14/07--01041--017 \*\*1508.75

REINSTATEMENT

06-07

**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 the 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.**

SIGNATURE

Aleksandr Gorbach

DATE

03/06/07

Typed or Printed Name of General Partner Signing Form

ALEKSANDR GORBACH

Telephone Number

(917) 403 0656