

1201 BAYS STREET
JALAHANNET, FL 33408

800-342-8096



A95000000638

ACCOUNT NO. : 0721000000032

REFERENCE : 502561 11645A

AUTHORIZATION : Patricia Pizzato

COST LIMIT : \$ 87.50

ORDER DATE : April 20, 1995

ORDER TIME : 10:59 AM

ORDER NO. : 502561

CUSTOMER NO: 11645A

800001461258

CUSTOMER: Mr. Patti Barr
LERNER & PEARCE, P.A.

2888 East Oakland Park Blvd
Fort Lauderdale, FL 33306

DOMESTIC FILING

NAME: SLK, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 20 PM 1:16

 ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jennifer Moran

EXAMINER'S INITIALS:

4/20/95
B/

SLK, LTD.

CERTIFICATE OF LIMITED PARTNERSHIP

Name of Limited Partnership

SLK, LTD.

Office, Name and Address of
Agent for Service of Process
Pursuant to Fla.Stat., 620.105

Allan M. Lerner, Esq.
Lerner & Pearce, P.A.
2888 East Oakland Pk. Blvd.
Ft. Lauderdale, FL 33306

95 APR 20 PM 1:16
SECRET
FBI - MIAMI

PA5000070302

Name and Address of General Partner
and Mailing Address of Limited
Partnership

SLK, INC.
Suite 312A
5700 Lake Worth Road
Lake Worth, Florida 33463

Latest Date Limited Partnership
Will Dissolve

January 1, 2020

SLK, INC.
General Partner to SLK, LTD.

BY: Stephen Lerner
Stephen Lerner, President

Dated: April 18, 1995

AFFIDAVIT OF GENERAL PARTNER

STATE OF NEW JERSEY)
)
COUNTY OF BERGEN)

FILED STATE
CLERK OF SUPERIOR COURT
APR 20 PM 1:16
TRENTON, N.J.

I, STEPHEN LERNER, being duly sworn, deposes and says:

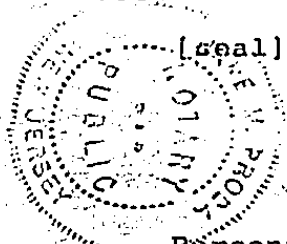
1. I am the President of SLK, INC., General Partner of SLK, LTD.
2. The capital contribution of Initial Limited Partner is \$100.00.
3. The anticipated capital contributions of Limited Partners is \$100.00.

FURTHER AFFIANT SAYETH NAUGHT.

SLK, INC.

By: *Stephen Lerner*
Stephen Lerner, President

SWORN TO and SUBSCRIBED before me this 18th day of April, 1995.



Jane M. Proda
Notary Public, State of New Jersey
Notary Printed Name: Jane M. Proda
My Commission Expires: 7/9/96
My Commission Number: _____

Personally Known ☒ Produced Identification _____

Type of Identification _____

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 620.105, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:

FIRST--THAT SLK, LTD.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF
FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF

Fort Lauderdale, STATE OF Florida,

HAS NAMED Allan M. Lerner, Esq. LOCATED AT 2888 East Oakland

Park Boulevard, CITY OF Fort Lauderdale, STATE OF Florida,

AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE: 
Stephen Lerner

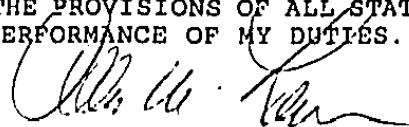
President, SLK, INC.
General Partner

TITLE: to SLK, LTD.

DATE: April 18, 1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 20 PM 11 16

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED LIMITED PARTNERSHIP, AT THE PLACE DESIGNATED IN THIS
CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER
AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE: 
ALLAN M. LERNER, ESQ.
Registered Agent

DATE: April 19, 1995

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tahira M. M. M.
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000638

600001873806

SLK, LTD.

EXTRACT WHILE IN THIS SPACE

2. New Mailing Address, if Applicable

State, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, if Applicable

State, Apt. #, etc.

City, State & Zip

Mailing Address

5700 LAKE WORTH ROAD, SUITE 312-A
LAKE WORTH FL 33463

Principal Office Address

5700 LAKE WORTH ROAD, SUITE 312-A
LAKE WORTH FL 33463

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

3. Date Formed or Registered to Do Business in
FLORIDA 04/20/1995

3a. Date of Last Report
N/A

4. State or Country of Formation
FL

5a. Capital Contributions as Shown
on Record
\$100.00

5b. Amount of Capital Contributions in
FLORIDA to date
\$100.00

6. FEI Number
Applied for

X

Applied for

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$8.75 Additional Fee required
for a Certificate of Status

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 \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, 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

LERNER, ALLAN M. ESQ.
C/O LERNER & PEARCE, P.A.
2888 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33308

10. If changed, new Registered Agent/Office

Name

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

State, Apt. #, etc.

City

FL

Zip Code

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)

SLK, INC.

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

5700 LAKE WORTH ROAD,

11b. City, State & Zip Code

LAKE WORTH FL 33463

up 12/29

11c. Registration/
Document Number

P05000030302

DEC 29 1995
12 27

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

Stephen Lerner

Stephen Lerner, President SLK, Inc.

DATE December 28, 1995
(407) 439-6636

Typed or Printed Name of General Partner Signing Form

Telephone Number

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-1099 FAX

800-342-8086



RECEIVED
95 DEC 29 AM 11:17
DIVISION OF CORPORATION

ACCOUNT NO. : 072100000032
REFERENCE : 787360 11645A
AUTHORIZATION : *Patricia Pijet*
COST LIMIT : \$ 191.25

ORDER DATE : December 29, 1995
ORDER TIME : 10:16 AM
ORDER NO. : 787360

A95000000638

CUSTOMER NO: 11645A

600001673886

CUSTOMER: Ms. Patti Barr
Lerner & Pearce, P.A.
2000 East Oakland Park Blvd.
Fort Lauderdale, FL 33306

DOMESTIC FILINGS

NAME: SLK, LTD.

XX 1996 ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XXX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS _____

FILED
95 DEC 29 PM 2:27
TALLAHASSEE, FL