## PLEASE READ ALL INSTRUCTIONS BEFORE COM

LIMITED **PARTNERSHIP** 



YMM)

Typed or Printed Name of General Partner Signing Form .

IVAN GOODSTEIN

SIGNATURE (

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

TALLATIMUS --

DATE June 7, 2002

Telephone Number 212 750-4663

REINSTATEMENT	DIVISION OF CORPORATIONS		
DOCUMENT #A960000017	148	ESTATEDE 1999	7-
GOODSTEIN FLORIDA RI	EALTY, LTD.		
2. Principal Office Address	3. Melling Office Address	4. Date Formed or Registered To Do Business in Florida 9/20/1996	
212 East 47th Street		5. FEI Number Applied For	
Suite, Apt. #, etc.	Suite, Apt. #, etc. 3rd Floor	58-227670.3 Not Applicable	
3rd Floor City & State	City & State	CERTIFICATE OF STATUS DESIRED S5.75 Additional Few required	
	New York, NY		•
Zip New York, College	Zip Country	78. Capital Contributions as shown on Record:	
	10017 USA	\$1,000.00	
10017 USA	10017 OSA	7b. Amount of Capital Contributions in FLORIDA to date:	
8. Name and Address of	f Current Registered Agent	\$1,000.00	
Name Seth I. Cohen, F		FEES:  1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50.	
Street Address (P.O. Box Number is Not Acceptable)		for each year due this office.  2.) Supplemental Fee(s): \$88.76 for each year due this office, beginning	
2500 North Military Suite, Apt #, Etc.	Trail	with 1992 calendar year.  3.) Penalty Fee(s): 3500 penalty fee for <u>each year report form is definitional.</u>	
Suite_111	State Zip Code	Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavil must be submitted along with a separate	
Boca Raton	FL 33431	and appropriate filing fee.	
Pursuant to the provisions of sections 620.1051 and 62 for the purpose of changing its registered affice or regisegent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)		elship organized or registered under the laws of the State of Florida, submits this statement tige was authorized by its general partner(s). I hereby accept the appointment of registered  OATE  OATE	CRZECOS (NO1)
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
	Address of Each General Partner	City, State and Zip Code 10a. Registration Document Number	
10. Name(s) of General Partner(s)	(Do NOT Use Post Office Box Numbers)	500005754115- -06/13/0201007(	
ISG Realty Corp., Inc.	212 East 47th St	New York, NY *** 1960000 *******	8.75
11.0		10017	
		437,50-2705,641 2127,50-266/13/02-0100 ***2565.00 ***	5E 7001
		2127,50- *ABRY "	rc303.UU
Note: General partners MAY NO	   be changed on this form; an a	mendment must be filed to change a general partner.	
Complex 110 A7/2VG, Cloudes Statutes I release the Division of			
11. It do hereby certify that the information supplied with this fitting is voluntarily furnished and does not quelify for the exemption stated in section 119.07(3) in the fitting is voluntarily furnished and does not quelify for the exemption supplied access. I further certify that the information indicated Corrorations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is use and exempt from public access. I further certify that it is included partnership, receiver or on this annual report is true and accurate and that my signature shall have the same lagal effects as if media under oath, I further certify that I am a General Pertner of the limited partnership, receiver or business employee this report as required by chapter 620. Florido Scauces.			