

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED  
PARTNERSHIP  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # A97000000284

1. Name of Limited Partnership

Industrial Commercial Real Estate, Ltd.

2. Principal Office Address - No P.O. Box #  
100 Bay Colony Lane

3. Mailing Office Address  
100 Bay Colony Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Fort Lauderdale, FL

City & State  
Fort Lauderdale, FL

Zip  
33308

Country  
USA

Zip  
33308

Country  
USA

8. Name and Address of Current Registered Agent

Name  
George Levin

Street Address (P.O. Box Number is Not Acceptable)  
100 Bay Colony Lane

Suite, Apt. #, Etc.

City  
Fort Lauderdale

State  
FL

Zip Code  
33308

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)

(REGISTERED AGENT MUST SIGN)

DATE

DEC 7<sup>TH</sup> 2010

**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
Industrial Commercial Real Estate, Inc.	100 Bay Colony Lane	Fort Lauderdale, FL 33308	P97000009847
<b>REINSTATEMENT 1998-2010</b>			

**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, Florida Statutes, 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

DATE

DEC 7<sup>TH</sup> 2010

Typed or Printed Name of General Partner Signing Form

George Levin, President of Industrial Commercial Real Estate, Inc., GP

Telephone Number

954-561-9560

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 DEC -8 PM 1:59

500188492525  
12/09/10--01005--022 \*#19008.75

CR2E039 (05/10)

4. Date Formed or Registered  
To Do Business in Florida 01/31/1997

5. FEI Number

27-4174975

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

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.



CORPORATION SERVICE COMPANY

A97000000284

ACCOUNT NO. : I20000000195

REFERENCE : 601483 4385117

AUTHORIZATION :

COST LIMIT : \$ PPD

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
10 DEC -8 PM 1:59

ORDER DATE : December 8, 2010

ORDER TIME : 9:40 AM

ORDER NO. : 601483-005

CUSTOMER NO: 4385117

DOMESTIC FILINGS

RECEIVED  
10 DEC -8 AM 10:46  
DIVISION OF CORPORATIONS  
SECRETARY OF CORPORATIONS  
STATE OF FLORIDA

NAME: INDUSTRIAL COMMERCIAL REAL  
ESTATE, LTD.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
XX        CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext# 2956

EXAMINER'S INITIALS

AK