

A97000001374

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
FEBRUARY 1999

99 MAY 12 PM 3:00

DOCUMENT # A97000001374

1. Name of Limited Partnership

KORN ASSOCIATES, LTD.

DO NOT WRITE IN THIS SPACE

2. Mailing Address

13796 Le Havre Drive

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

Zip

33418

Country

Palm Beach

3. Principal Office Address

13796 Le Havre Drive

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

Zip

33418

Country

Palm Beach

4. Date Filing of Registration
To Do Business in Florida

06-23-97

5. FEI Number

65-0765191

Applicable Fee

Not Applicable

6. CERTIFICATE OF STATUS DESIRED []

\$8.75 Additional Fee required
for a Certificate of Status

7. State or Country of Formation

8a. Capital Contributions as Shown
on Record

4,000,000.00

8b. Amount of Capital Contributions in
FLORIDA to date

4,000,000.00

FEES: 1)

Filing Fee(s): Computed at a rate of \$7 per \$1,000 on 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): \$88.75 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

Lee Korn
2295 South Ocean Blvd, # 510
Palm Beach, FL 33480

10. If changed, new registered agent office

Name

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

Suite, Apt. #, etc.

800002883438--2

City

-05/24/99--01009--021

***1026.25

***1026.25

10a. Pursuant to the provisions of sections 620.10(1) 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). Thereby 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
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

Lee Korn

2295 S. Ocean Blvd

Palm Beach, FL 33480

Robert Korn

13796 Le Havre Drive

Palm Beach Gardens, FL
33418

Sheldon Korn

35 Sutton Place

New York, NY 10022

REINSTATEMENT 99

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 form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I declare 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. Further certify that the information included 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

5-5-99

Typed or Printed Name of General Partner Signing Form

ROBERT KORN

Telephone Number

CR2E039 (12/98)