

A99000001322
 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM
FILED

**LIMITED PARTNERSHIP
 REINSTATEMENT**



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

02 APR 30 AM 8:48

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

MJH

DOCUMENT # A99000001322

1. Name of Limited Partnership

KESSLER, LTD.

900005578309--7

-05/22/02--01013--015

***3183.75 ***3078.75

2. Principal Office Address

6537 NW 39th Terrace

3. Mailing Office Address

6537 NW 39th Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33496

Country

USA

Zip

33496

Country

USA

4. Date Formed or Registered
 To Do Business in Florida

8/1/1999

5. FEI Number

65-6362938

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
 for a Certificate of Status

7a. Capital Contributions as shown on Record:

\$2,000,000.00

7b. Amount of Capital Contributions in FLORIDA to date:

\$2,000,000.00

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, 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 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8. Name and Address of Current Registered Agent

Name

Robert H. Kessler

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

6537 NW 39th Terrace

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33496

9. 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
 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
IDA KESSLER (deceased)	2504 Antiqua Terrace #4	Coconut Creek, FL 33066	N/A
ROBERT H. KESSLER	6537 NW 39th Terr	Boca Raton, FL 33496	N/A
RICHARD S. KESSLER	1576 East Quail Pointe Circle	Memphis, TN 38120	N/A

REINSTATEMENT

2000-2001-2002

RF \$ 3,078.75

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 exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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

Robert H. Kessler

DATE

4/25/02

Typed or Printed Name of General Partner Signing Form

ROBERT H. KESSLER

Telephone Number

561-912-9324

CR2E039 (9/01)