

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Sandra Worthington
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 MAR 17 PM 2:17

DOCUMENT #

B9500000229

1. Name of Limited Partnership

Talwag Investments Limited Partnership, a Michigan
limited partnership

DO NOT WRITE IN THIS SPACE.

2. Mailing Address
11900 Twelve Mile Road

3. Principal Office Address
11900 Twelve Mile Road

4. Date Formed or Registered
To Do Business in Florida 6-23-95

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

5. FEI Number
38-3236879

Applied For
Not Applicable

City & State
Warren, Michigan

City & State
Warren, Michigan

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status

Zip
48093

Country
USA

Zip
48093

Country
USA

7. State or Country of Formation Michigan

8a. Capital Contributions as Shown
on Record
\$47,500.00

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): \$103.75 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.

8b. Amount of Capital Contributions in
FLORIDA to date
\$47,500.00

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/officer

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, etc.

City Tallahassee, FL Zip Code 32301

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Deborah D. Skipper

DATE March 17, 1997

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

Samir S. Al-Hadidi

11900 Twelve Mile Road
Suite 200
Warren, Michigan 48093

B-95000000229

PENALTY - 1,000.00
AR - 665.00
SUPP - 207.50
CUS - 8.75
1,881.25

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-03/19/97--01099--005
***1881.25 ***1881.25

REINSTATEMENT

1996-1997

BK CUS

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

Samir S. Al-Hadidi

DATE 3/14/97

Typed or Printed Name of General Partner Signing Form

Samir S. Al-Hadidi

Telephone Number (810) 573-0020

CR2E039 (1/97)