

04/05/2006 16:14 0

APR. 5. 2006 3:19PM CORP SERVICE COMP

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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06 APR 12 AM 9:11

LIMITED
PARTNERSHIP
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSSECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B96000000021

1. Name of Limited Partnership

GULF ISLAND RESORT, L.P., LTD.

2. Principal Office Address

6040 SEA RANCH DRIVE

Suite, Apt. #, etc.

City & State

HUDSON, FLORIDA

Zip

34667

Country

USA

3. Mailing Office Address

6040 SEA RANCH DRIVE

Suite, Apt. #, etc.

City & State

HUDSON, FLORIDA

Zip

34667

Country

USA

CR2E039 (1/1/06)

4. Date Formed or Registered
To Do Business in Florida

1/11/1996

5. FBI Number

59-3167770

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DERIVED

20175 Annual Report received on
10/1/2006 at 10:00 AM

B. Name and Address of Current Registered Agent

Name

MAURICE J. BALMGARTEN, ESQ.

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

100 S. E. 2ND STREET

Suite, Apt. #, Etc.

SUITE 4300

City

MIAMI

State

FL

Zip Code

33131

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$28.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records

B. Pursuant to the provisions of section 600.1810 or 600.1808, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 600, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

REGISTERED AGENT MUST SIGN

DATE

4/6/06

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
GULF ISLAND RESORT, INC.	6040 SEA RANCH DRIVE	HUDSON, FL, 34667	P93000004563
			2003-2004 2005-2006

REINSTATEMENT

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, F.S. 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 effect as if made under oath. I further certify that I am a General Partner of the limited partnership, partner or owner responsible to prepare this report as required by chapter 600, Florida Statutes.

SIGNATURE

DATE

4/6/06

Typed or Printed Name of General Partner Signing Form

Alex Bistricher, Dir. GP

Telephone Number

04/04/2006 17:54 0
04/04/2006 TUE 14:38 FAX 718 438 0177

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Gulf Island Resort, LP

C/o Anania, Bandklayder, Blackwell, Baumgarten, Torricella & Stein
100 Southeast Second Street, Suite 4300, Miami, Florida 33131-2150

April 4, 2006

Division of Corporations
Attn: Partnership Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Reinstatement for Gulf Island Resort LP

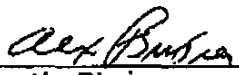
To Whom It May Concern:

Please be advised that the Annual Reports for the above captioned entity were not filed for 2003, 2004 and 2005 due to the fact that forms were mistakenly mailed to an incorrect address, therefore, we never received them. In light of this fact, we respectfully request that you remove the penalties due to these accounts so that we can pay the appropriate fees and reinstate this entity.

Thank you for your attention to this matter.

Sincerely,

Gulf Island Resort, LP
By: Gulf Island Resort, Inc.

By: 
Alex Bistricev

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

*PLEASE FILE AFTER GP REINSTATEMENT
ON #H06000093384*

LP/LLP REINSTATEMENT

GULF ISLAND RESORT, L.P., LTD.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$4,000.00

2000.00

Electronic Filing Menu

Corporate Filing Menu

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06 APR 12 AM 9:11
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