

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

LIMITED LIABILITY COMPANY REINSTATEMENT
2001
UBR



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

FILED

01 DEC 17 PM 2:34
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **M97000000774**

1. Limited Liability Company's Name

MIDWAY PLAZA GP LLC

2. Principal Office Address

10 STERLING AMERICAN PROPERTY II LP

Suite, Apt. #, etc.
111 GREAT NECK RD, SUITE 408

City & State
GREAT NECK, NY

Zip
11021

3. Mailing Office Address

10 STERLING AMERICAN PROPERTY II LP

Suite, Apt. #, etc.
111 GREAT NECK RD, SUITE 408

City & State
GREAT NECK, NY

Zip
11021

4. State/Country of Formation

DELAWARE

5. Date Organized or Qualified To Do Business in Florida

11/24/97

6. FEI Number

11-3406857

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED

\$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

UNITED CORPORATE SERVICES, INC.

300004735353-4

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

9200 SOUTH DADELAND BLVD

-12721701--01007--023

*******50.00 *****50.00**

Suite, Apt. #, Etc.

SUITE 508

City

MIAMI

State

FL

Zip Code

33156

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	SAP II MANAGER FAX.	111 GREAT NECK RD, SUITE 408	GREAT NECK, NY 11021

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager

Arthur Friedman

Date **12/11/01**

Daytime Phone # **516-773-3800**

Typed or printed name of signing Managing Member/Manager

Arthur Friedman

CR2604 (9/01)

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Sterling Equities, Inc.

December 11, 2001

Division of Corporations
Attn: Partnership Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Pelican Run Associates LP, FEI # 11-3426514
Midway Plaza Associates LP, FEI # 11-3407457
Summer Chase Apartments Associates LLC, FEI # 11-3527903
Pelican Run GP LLC, FEI # 11-3426704
Midway Plaza GP LLC, FEI # 11-3406857
900 N. Federal Highway Associates LLC, FEI # 11-3449007

To whom it may concern:

We are writing in response to the revocation notices sent to the above referenced six entities, copies of which are attached.

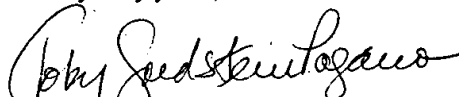
Please note that we never received any copies of the 2001 Florida Business Report Forms for any of these entities, nor any subsequent correspondence relating to pending revocations. We have always filed timely for these entities and plan to continue to do so. Therefore, we wish to file the 2001 Florida Business Reports for all of these entities, and are returning the completed forms to you, along with checks for the related filing fees.

In order to prevent similar problems from arising in the future, please amend the mailing address for these entities to read as follows:

111 Great Neck Road, Suite 408, Attention: Tax Department, Great Neck NY 11021

Thank you for your prompt attention to this matter.

Very truly yours,


Toby Goldstein Pagano CPA