

2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A99000000785

Entity Name: SORKIN GROUP, LTD.

Current Principal Place of Business:

4721 UNIVERSITY DRIVE
CORAL GABLES, FL 33146

Current Mailing Address:

% R&S MGMT
1981 J N PEASE PL, SUITE 101
CHARLOTTE, NC 28262-4529

FEI Number: 65-0925474

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SORKIN, LAWRENCE
4721 UNIVERSITY DRIVE
CORAL GABLES, FL 33146 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

General Partner Detail :

Document # P99000044263
Name NIKROS, INC.
Address 4721 UNIVERSITY DRIVE
City-State-Zip: CORAL GABLES FL 33146

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAWRENCE SORKIN

REGISTERED AGENT

04/14/2014

_____ Electronic Signature of Signing General Partner Detail

_____ Date