

STATE OF FLORIDA: CONTINUOUS MARRIAGE AFFIDAVIT
: SS.
COUNTY OF DADE:

BEFORE ME, the undersigned authority, personally appeared THELMA LANSKY, who, after being duly sworn deposes and states as follows:

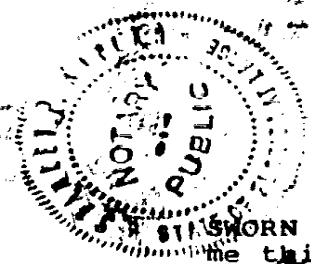
1. That the Affiant was married to MEYER LANSKY prior to November 15, 1973, and remained continuously married to said MEYER LANSKY until the time of his death on January 15, 1983, in Dade County, Florida, as evidenced by the certified copy of his death certificate which is attached hereto.

2. That the State of Florida, Department of Revenue, has issued to the estate of the Affiant's aforesaid deceased husband, MEYER LANSKY, a Nontaxable Certificate and Receipt for Estate Tax number G 23378, which is attached hereto.

3. That the Affiant and her aforesaid late husband, MEYER LANSKY, are the same parties named as grantees in that certain Warranty Deed dated November 15, 1973 and recorded on November 30, 1973 in Official Records Book 8520 at page 35 of the Public Records of Dade County, Florida, wherein title was conveyed to them as tenants by the entireties of the following described real property and being in the County of Dade, State of Florida; to wit:

Condominium Apartment No. 2-A, and Cabana Unit No. ---, and Domestic's Unit No. ---, and Boat Slip No. ---, of IMPERIAL HOUSE CONDOMINIUM, INC., a condominium, all as set forth in the Declaration of Condominium and the exhibits annexed thereto and forming a part thereof, recorded under Clerk's File No. 73R-119870 of the Public Records of Dade County, Florida.

FURTHER AFFIANT SAYETH NAUGHT.



SWORN TO AND SUBSCRIBED before me this 17th day of JULY, 1991.

Stanley P. Kaplan
NOTARY PUBLIC STANLEY P. KAPLAN

Thelma Lansky
THELMA LANSKY
5255 Collins Avenue
Miami Beach, Florida 33140

This Instrument Was Prepared By
STANLEY P. KAPLAN, Attorney
305 Biscayne Building, Miami, Fla.

91R251251 1991 JUL 22 15:20

STATE OF FLORIDA

DEPARTMENT OF

Health & Rehabilitative Services

DISTRICT ELEVEN

REG. 151176 259

Graham, Governor

DADE COUNTY DEPARTMENT OF
PUBLIC HEALTH

1350 N. W. 14TH ST.
MIAMI, FLORIDA 33125

I HEREBY CERTIFY THIS TO BE A TRUE
LOCAL REGISTRAR'S RECORD

Valid unless the raised
the Bureau of Vital
is affixed.

Bertie Marshall
DEPUTY REGISTRAR
VITAL RECORDS UNIT

CERTIFICATE OF DEATH FLORIDA

1. MEYER LANSKY			STATE FILE NO.	DATE OF DEATH (Mo., Day, Year)
			SEX	MALE
			JAN. 15, 1983	
2. RACE - <input type="checkbox"/> White, <input type="checkbox"/> Black, <input type="checkbox"/> Am. Indian, <input type="checkbox"/> Other	3. AGE	4. SEX	5. DATE OF BIRTH (Mo., Day, Year)	6. COUNTY OF DEATH
WHITE	80		July 4, 1902	Dade
7a. CITY, TOWN OR LOCATION OF DEATH	7b. HOSPITAL OR OTHER INSTITUTION		7c. INPATIENT OR OUTPATIENT (Indicate DOA, DOP, or OI - Inpatient (Specify))	
Miami Beach	Mt. Sinai Medical Center		Inpatient	
8. STATE OF BIRTH (Mo., Day, Year)	9. CITIZENSHIP OF WHAT COUNTRY	10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED	11. SPOUSE (Name, Address, City, State)	
Russia	U.S.A.	married	Thelma Scheer	
12. SOCIAL SECURITY NUMBER	13a. USUAL OCCUPATION	13b. BUSINESS OR INDUSTRY		
	Investor (ret.)	Investments		
14a. STATE	14b. COUNTY	14c. CITY, TOWN OR LOCATION	14d. STREET AND NUMBER	14e. INSIDE CITY LIMITS (Specify Yes or No)
Florida	Dade	Miami Beach	5255 Collins Av.	Yes
15. FATHER - NAME (First, Middle, Last)		16. MOTHER - NAME (First, Middle, Last)		
Max Lansky		Yetta Gracz		
17a. INFORMANT - NAME (Type of Informant)		17b. ADDRESS (Street, City, State)		
Vincent Lombardo		13105 Ortega Lane, North Miami, Florida		
18a. BURIAL, CREMATION, REMOVAL, OTHER	18b. CEMETERY OR CREMATORIAL		18c. CITY, TOWN OR LOCATION	
Burial	Mt. Nebo Cemetery		Miami, Florida	
19a. FUNERAL DIRECTOR - Signature		19b. ADDRESS (Street, City, State)		
<i>Howard Gruner</i>		Rubin Zilbert Chapel, 1701 Alton Rd. Miami Beach, FL		
20. SIGNATURE AND TITLE OF CERTIFYING PHYSICIAN		21. DATE SIGNED (Mo., Day, Year)		
<i>Howard Gruner MD</i>		Jan. 15, 1983		
22. NAME AND ADDRESS OF CERTIFYING PHYSICIAN		23. TIME OF DEATH		
Howard Gruner, MD 1688 Meridian Av. Miami Beach, FL		6:00 a		
24. REGISTER		25. SIGNATURE OF REGISTER		
<i>Shel Zilbert</i>				
26. IMMEDIATE CAUSE		27. OTHER SIGNIFICANT CONDITIONS		
metastatic carcinoma of the lung (squamous cell carcinoma)		no		
28. PARTIAL CAUSE		29. ACCIDENT, SUICIDE OR HOMICIDE (If Undetermined)		
no		no		
30. OCCURRED AT WORK (Specify)		31. PLACE OF INJURY (If Name, Street, City, State, Zip (Specify))		
no				

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WITNESSES TO DEATH MUST SIGN BEFORE

PHYSICIAN MUST SIGN AT LAST



STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32301

DR-302
R. 11/82

OFF. REC. 15117PG 260

**NONTAXABLE CERTIFICATE AND RECEIPT
FOR ESTATE TAX**

RANDY MILLER
EXECUTIVE DIRECTOR

TO: Stanley P. Kaplan, P.A.
Str. 305 Biscayne Bldg.
19 W. Flagler St.
Miami, Fl 33130

RE: The Estate of Lansky, Meyer
SOCIAL SECURITY NO. [REDACTED]
DATE OF DEATH: 1-15-83
RESIDENT OF: Dade COUNTY
STATE OF: Florida
DATE: 3-21-84

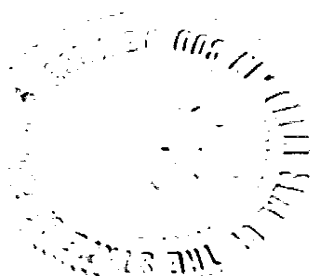
RECORDED IN OFFICIAL RECORDS BOOKS
OF DADE COUNTY, FLORIDA.
RECORD VERIFIED
Clerk of Circuit & County
Courts

G23378

THIS IS TO CERTIFY, That in accordance with the provisions of Chapter 198, Florida Statutes, there has been filed with this office a sworn report or return for Estate Taxes as required by law and on the basis thereof it has been ascertained the above estate is not subject to the Florida Estate Tax. The issuance of this certificate, however, shall not preclude the assessment and collection of Estate Taxes subsequently determined to be due the State of Florida.

If proof of non liability by the above estate for the Florida Estate Tax is required by any person this Certificate may be exhibited as evidence of such non liability.

Given in quadruplicate under my hand and the seal of the State of Florida.



Randy Miller

Executive Director
Department of Revenue

Not valid without seal affixed.