FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT#

98 DEC -1 AMII: 09

\$150

1. Name of Limited Partnership

	A25722	A25722			
BOCA RIO CENTRE, L	TD.		11.40.4111.411.4111.4111.4111.4111.4111	2/2	
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
7777 GLADES ROAD	7777 GLADES ROAD		01/04/1988	\$30.00	
SUITE 310	Suite 310 Boca raton FL 33434			Ψοσίου	
BOCA RATON FL 33434	BOOM BRION PL 33434		11/14/1997	5b. Amount of Capital Contributions in FLORIDA	
3	23 Principal Office Addr	2a. Principal Office Address		to date:	
2. Mailing Address	Za. Principal Onice Additi	555	FL	\$30.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable	
City & State	City & State		65-0205258 7. Certificate of Status Desired		
Zip Country	Zip	Country	7 - Certificate of Status Desired	\$8.75 Additional Fee Required	
			8. Make check payable to: Dept. of	heck payable to: Dept. of State (See reverse side for fee information)	
			40		
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office			
SCHMIER, ROBERT J 7777 GLADES ROAD SUITE 310		Name			
		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.			

- -					
		Name			
SCHMIER, ROBERT J	ļ				
7777 GLADES ROAD	· ·	Street Address (P.O. Box Number Is Not Acceptable	le)		
	ļ	<u> </u>			
SUITE 310	Į.	Sulte, Apt. #, etc.			
BOCA RATON FL 33434	ļ		Zip Code		
		City	FL 2p code		

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits the 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 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
S.F.A., INC.	7777 GLADES ROAD, #310	BOCA RATON FL 33434	K10175
		10000270	
		****150	.00 ****150.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 1 do hereby certify that the information supplied with this filling 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.

partner SIGNATURE.

<u>561-483-8400</u>

11/16/98