

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 20 AM 11:39

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12/27

1. Name of Limited Partnership **1a. DOCUMENT #**
A96000001594

THE PLUZNICK FAMILY LIMITED PARTNERSHIP

2. Mailing Address **2a. Principal Office Address**

3211 S. Ocean Blvd, #801
Highland Beach, FL 33487

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Highland Beach, FL 33487

3. Date Formed or Registered
August 27, 1996

3a. Date of Last Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions as Shown on record
\$2,000,000.00
anticipated

5b. Amount of Capital Contributions in FLORIDA to date
\$97.00

6. FEI Number
Pending (copy of application attached) Applied For
 Not Applicable

7. Certificate of Status Desired
N/A \$8.75 Additional Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

Jerome R. Miller, Esq.
JEROME R. MILLER, P.A.
1300 N. Federal Highway, Suite 107
Boca Raton, FL 33432

10. If changed, new Registered Agent/Office

Name: N/A

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

Suite, Apt. #, etc.:

City: FL Zip Code:

10a. Pursuant to the provisions of sections 620.10(1) and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement 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): N/A DATE: _____

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

| 11. Names of General Partner(s) | 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) | 11b. City, State & Zip Code | 11c. Registration/Document Number |
|---------------------------------|---|-----------------------------|-----------------------------------|
| Selma Ruth Pluznick | 3211 S. Ocean Blvd., #801 | Highland Beach, FL 33487 | N/A |
| Marcy Pluznick-Marrin | 3844 Willow View Court | Santa Rosa, CA 95403 | N/A |
| Michael Pluznick | 41 Oak Knoll Drive | San Anselmo, CA 94960-1188 | N/A |

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

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE *Selma Ruth Pluznick* DATE: 12/1/96
Selma Ruth Pluznick
Typed or Printed Name of General Partner Signing Form: Selma Ruth Pluznick Daytime Telephone Number: (561) 272-5616

CR2E003 (6/96)