

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

LIMITED PARTNERSHIP
ANNUAL REPORT
1998

1a. DOCUMENT #
A96000001919



g/12/96

PEBB ENTERPRISES DELRAY COMMONS LTD.

Mailing Address 1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334		Principal Office Address 1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334		3. Date Formed or Registered 10/15/1996	5a. Capital Contributions as Shown on record. \$9,900.00
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		3a. Date of Last Report 03/06/1997	
				4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date.
				6. FEI Number 65-0701343 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
				7. Certificate of Status Desired <input type="checkbox"/> \$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 ROSENBERG, JEFFREY M 1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334	10. If changed, new Registered Agent/Office	
	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL Zip 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 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) _____ 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) PEBB MANAGEMENT COMPANY, INC	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1000 CORPORATE DRIVE,	11b. City, State & Zip Code FORT LAUDERDALE FL 33	11c. Registration/Document Number P96000039415
200002385262-- 5 -12/30/97--01011--015 ****541.25 ****541.25			

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

12. I do 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.

PEBB MANAGEMENT COMPANY, INC., General Partner
SIGNATURE *[Signature]* DATE **12-9-97**
Typed or Printed Name of General Partner for Signing Form by **Jeffrey M. Rosenberg, Sec.-Treas** Daytime Telephone Number **(954) 771-3305**

CP2E003 (6/97)