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

1. Name of Limited Partnership

DOCUMENT # **A20455**

1350 POMPANO ASSOCIATES LTD.

97-AR CM FILED

96 OCT 15 PM 1: 11

SEGNETARY OF STATE TALLAHASSEE, FLORIDA



			-241				
Mailing Address % 415 S. FEDERAL HWY. P.O. BOX 247 DANIA FL 33004		Principal Office Address % 415 S. FEDERAL HWY. P.O. BOX 247 DANIA FL 33004			Oate Formed or Registered 07/30/1985 3a. Date of Last Report	5a. Capital Contributions as Shown on record \$205,640.00	
					10/30/1995	5b. Amount of Capital Contributions in FLORIDA	
					4. State or Country of Formation	to daty	
2. Mailing Address		28. Principal Office Address			FL	205,640.00	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. FE: Number 59-1794673	Applied For	
City & State		City & State			Not Applicable		
Zip Country		Zip Country		7. Certificate of Status Desired		\$8.75 Additional Fee Required	
μ	Country	210	Country	8. Make check payable to Dept of State (See reverse side for fe		of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10, It changed, new Registered Agent/Office				
ADMIN CORP.			Name				
	EDERAL HWY.		Street Address (ess (P.O. Box Number Is Not Acceptable) r, etc		
DANIA FL	. 33004						
			City		FL Zip Code		
agent i SIGNATURE (Re	am familiar with, and accept the obli gistered Agent Accepting Appointme	gations of section 620 192, Florida Statutes		<u> </u>	DATE		
A GENI		AT IS A CORPORATION UST BE REGISTERED				ER BUSINESS ENTITY	
11. Name	e(s) of General Partner(s)	Address of Feet Central Dedres		11b.	City, State & Zip Code	11c. Registration/ Document Number	
AUSLAN	DER, STEVEN L. 415 S. FEDERAL HWY.		DANIA FL				
,					-10/22	9831976 2/9601139013 576.25 ****576.25	
Note: Ge	eneral partners MAY	NOT be changed on this	form; an am	endme	nt must be filed to ch	ange a general partner.	

12. I 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 Statules. I receive 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 eath. I further certify that I am a General Partner of the limited partnership race ver or trusted empowered to execute this report as required by chapter 670. Florida Statutes.

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

Steven Auslander

CR2F003 (6/9