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

1. Name of Limited Partnership

SIGNATURE

1a. DOCUMENT # **A24418**

FILED
SECRETARY OF STATE
DIVESION OF CORPORATIONS

98 OCT - 9 PM 2: 04

AUTO TRAIL, LTD.											
Mailing Address	Principal Office Address			3. Date Formed or Registered 5a.		Capital Contributions as Shown on record.					
146 E FLAGLER ST. 146 E FLAGLER ST. MIAMI FL 33131 MIAMI FL 33131			04/23/1987 3a. Date of Lest Report		\$21,000.00						
				12/01/1997	5b. Amou Contr	int of Capital Ibutions In FLORIDA					
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	21000						
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6, FEI Number	Applied For						
City & State	City & State			65-0017768	Not Applicable						
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee Information)							
				147.00+88.7	-	235. 75					
9. Name and Address of C	10. If changed, new Registered Agent/Office										
KOZOLCHYK BENNY 146 E. FLAGLER ST. MIAMI FL 33131		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.									
							City			FL	Zip Code
							agent I am familiar with, and accept the obling SIGNATURE (Registered Agent Accepting Appointme	ice or registered ageni, or both, in the State of F gations of section 620.192, Florida Statutes. nt)	Florida. Such chang	PART	orized by its general partner(s). I hereb
		11. Name(s) of General Partner(s)	118. Address of Each Ger (Do NOT Use Post Office	neral Partner e Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number			
KOZOLCHYK, BENNY	146 E. FLAGLER ST.		MIAMI FL 33131								
				000002 -10/13 *****2	662 5 3788 -0 31.75	9 7 0 51 1066012 *****235,75					
Note: General partners MAY I	NOT be changed on this fo	rm; an ame	endme	nt must be filed to cha	enge a ge	eneral partner.					
12. I do hereby certify that the information supplied Corporations from any liability of non-complian	with this filing is volunterily furnished and does be with Section 116.03(3)(k) in the event that the my signature shall prave the same legal effects	not qualify for the e e information suppli	exemption s	tated in Section 119.07(3)(k), Florida S ad exempt from public access. I further	statules. I releat r certify that the	te the Division of Information Indicated on					