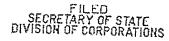
FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS



99 JAN -5 PH 1:49

1. Name of Limited Partnership	1a. DOCUME A97000012								
WHARTON INVESTMENT GROU	P OF MARGATE, LTE	_							
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.					
5082 COCONUT CREEK PARKWAY	5082 COCONUT CREEK PARKWAY		06/11/1997	- \$990.00					
MARGATE FL 33063	MARGATE PL 33003 3d. Date of Last Report			1					
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	Contribu to date:	of Capital itions in FLORIDA				
			FL						
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0767901		Applied For Not Applicable				
City & State	City & State		7. Certificate of Status Desired						
Zip Country	Zip Co	untry	8. Make check payable to: Dept. of S		\$8.75 Additional Fee Required side for fee information)				
Name and Address of Current Re	9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office								
Name		lame							
PROCACCI, PHILIP J 5082 COCONUT CREEK PARKWAY	Street Address (P.O.		Box Number is Not Acceptable)						
MARGATE FL 33063	Suite, Apt. #, etc.		-0172579901094020 -****141.25 ****141.25						
		City			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)									
A GENERAL PARTNER THAT IS MUST I	S A CORPORATION, LIN BE REGISTERED AND	IITED PART ACTIVE WI	[NERSHIP OR OTHEI TH THIS OFFICE.	R BUSIN	ESS ENTITY				
11. Name(s) of General Partner(s)	11a. Address of Each General Pa		City, State & Zip Code	11c.	Registration/ Document Number				
PROCACCI COMMERCAIL REALTY,	5082 COCONUT CREEK PA	MA	RGATE FL 33063	K16732		(00/0) 60			
•	-					COUCH			
•									
	1			1		1			

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 filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release to	the Divisio	n 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 supplied is	ormation I	ndicated on
	this annual report is true and accurate and that my signature shall have the same legal effects as if made under cath. I further certify that I am a General Partner of the limited partner	ship, recei	ver or trustee
	empowered to execute this report as required by chapter 620, Florida Statutes.		