## 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

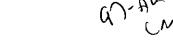
Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A05723** 

& F WAREHOUSE LTD



FILED

95 OCT -3 PM 3: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA



a ring Address 301 ARTHUR GODFREY ROAD SUITE 202 MIAMI BEACH FL 33140  P. Mailing Address uite, Apt. #, etc. Sity & State	Principal Office Address  801 ARTHUR GODFREY ROAD SUITE 202 MIAMI BEACH FL 33140  2a. Principal Office Address  Suite, Apt. #, etc.  City & State		3. Date Formed or Registered     05/10/1977      3a. Date of Last Report     12/18/1995      4. State or Country of Formation     FL      6. FEL Number	5a. Capital Contributions as Shown on record \$170,435.00  5b. Amount of Capital Contributions in ELORIDA to date
MAMI BEACH FL 33140  Mailing Address  uite, Apt. #, etc.	2a. Principal Office Address Suite, Apt. #, etc. City & State		12/18/1995  4. State or Country of Formation FL  6. FEL Number	5b. Amount of Capital Contributions in FLORIDA
uite, Apt. #, etc.	Suite, Apt. #, etc. City & State		FL 6 FE! Number	to date
ity & State	City & State		6. FEI Number	<u> </u>
			59-1790505	Applied For Not Applicable
ip Country			7. Certificate of Status Desired	\$8.75 Additional
	Zφ	Country	·	Fee Required  If State (See reverse side for fee informatic
•			<u></u>	
9. Name and Address of Current Registered Agent PERTNOY, EARL 801 ARTHUR GODFREY ROAD SUITE 202 MIAMI BEACH FL 33140  10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above		10. If changed, new Registered Agent/Office Name		
		Suite, Apt. #, etc  City  FL  Zip Code  re named limited partnership organized or registered under the laws of the State of Florida, submits this statement		
for the purpose of changing its registered of agent. I am familiar with, and accept the oblanding GNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	fice or registered agent, or both, in the State of Figations of section 620-192 Florida Statutes	Florida Such change was a	uthorized by its general partner(s) Ther  DATE  TNERSHIP OR OTHE	eby accept the appointment of registers
Name(s) of General Partner(s)	Address of Each Gene 11a. (Do NOT Use Post Office		City, State & Zip Code	11c. Registration/ Document Number
PERTNOY, EARL	5660 COLLINS AVENU	JE M	IAMI BEACH FL SOCII -10/10	001570266 79601020 - 020 76.25 ****576.25

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 filling 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 I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required to phapter 620. Florida Statutes

SIGNATURE .....

Typed or Printed Name of General Partner Signing Form EARL PERTNOY DATE 10-1-96

Daytime Telephone Number: 305-672-6575