

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 DEC 29 AM 9:54

1. Name of Limited Partnership

1a. DOCUMENT #
A07852

HECHT PROPERTIES, LTD.



08/19

Mailing Address P.O. BOX 350940 401 N.W. 38TH COURT MIAMI FL 33135		Principal Office Address P.O. BOX 350940 401 N.W. 38TH COURT MIAMI FL 33135		3. Date Formed or Registered 08/22/1979	5a. Capital Contributions as Shown on record \$300,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 01/27/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date: \$8.75 Additional Fee Required
City & State		City & State		6. FEI Number 59-1976519	
Zip	Country	Zip	Country	7. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee information)					

9. Name and Address of Current Registered Agent HAVENICK, FRED 401 N.W. 38TH CT. MIAMI FL 33126		10. If changed, new Registered Agent/Office	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, etc.	
		City	Zip Code
		FL	

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) FLO H, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 401 N.W. 38TH COURT	11b. City, State & Zip Code MIAMI FL	11c. Registration/Document Number M61292
300002398383--3 -01/13/98--01062--009 ****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.

SIGNATURE *Sandra B. Mortham*

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CF2E003 (6/97)