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

SIGNATURE

Typed or Printed Name of General Partner Signing Form Howard B. Lefkowitz

1a. DOCUMENT #

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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LBS, LTD.		I FOUNDI 1991 IIIN BIHI BIHI FOUN DIIO FALI BEBIR DIRK DIDI GALI BIDI BIDII BIHIL II

Malling Address 1900 SUMMIT TOWER BLVD 1900 SUMMIT TOWER BLVD 1900 ORLANDO FL 32810 2. Mailing Address 28. Principal Office Address 29. Mailing Address 29. Principal Office Address 20. Mailing Address 20. Mailing Address 20. Mailing Address 20. Mailing Address 20. Mailing Address 20. Mailing Address 21. Mailing Address 22. Mailing Address 23. Principal Office Address 24. State 25. City & State 26. City & State 27. Country 27. Country 27. Country 27. Country 27. Country 28. Minus 29. Name and Address of Current Registered Agent 10. Name 10. Name 10. Street Address (90. Box Numbrand Agent) 10. Street Address (90. Box Numbrand Agent) 10. City 10. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered office or registered agent, or boll, in the State of Florida Such change was authorized agent. I am familiar with, and accept the obligations of section 620 192. Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered office or registered agent, or boll, in the State of Florida Such change was authorized 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 A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH The Address of Sanda General Partner (s). 111. Name(s) of General Partner(s).	e Formed or Registered 5/02/1984 ate of Last Report 5/27/1995 e or Country of Formation Number 2445261	5b. Amount Contrib to date:	Contributions as on record. 01,223.00 t of Capital ulions in FLORIDA	
ORLANDO FL 32810 ORLANDO FL 32810 ORLANDO FL 32810 38. 1 4. State 28. Principal Office Address Suite, Apt. #, etc. City & State City & State City & State City & State 7. Ce 8. Mi 9. Name and Address of Current Registered Agent LEFKOWITZ, HOWARD B. 1914 ALBERTA DR. WINTER PARK FL 82799 WINTER PARK FL 82799 102. City 103. Pursuant to the previsions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida Such change was authorized agent. I am lamiliar with, and accupt the obligations of section 620 192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO THE REGISTERED	2/27/1995 e or Country of Formation	to date:		
28. Principal Office Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country Zip Country 8. Mr 9. Name and Address of Current Registered Agent 10 LEFKOWITZ, HOWARD B. 1014 ALBERTA DR. WINTER PARK FL 22769 Street Address (D.O. Box Numbers) Suite, Apt. #, etc. City 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized 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 A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO. 11. Name(s) of General Partner(s) 11b. City	-2445261	to date:		
City & State City & State 7. Ce Zip Country Zip Country 8. Manue 9. Name and Address of Current Registered Agent LEFKOWITZ, HOWARD B. 101 102 103 104 105 105 105 105 105 105 105 105 105 105		[[Applied For	
7. Ce Zip Country Zip Country 9. Name and Address of Current Registered Agent 10 LEFKOWITZ, HOWARD B. 1014 ALBERTA DR. WINTER PARK FL 92709 Street Address (P.O. Box Numbers) Address (P.O. Box Numbers) 110 Address (P.O. Box Numbers) 111 Name(s) of General Partner(s) 112 Address of Each General Partner(s) 115 City	ificate of Status Desired		Applied For	
9. Name and Address of Current Registered Agent 10 LEFKOWITZ, HOWARD B. 1014 ALBERTA DR. WINTER PARK FL 22799 Street Address (P.O. Box Numbers) Suite, Apt. #, etc. City 10a. Pursuant to the proxisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized agent. I am lamiliar with, and accept the obligations of section 620.192. Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO Address of Each General Partner. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. Ci			Not Applicable \$8.75 Additional	
LEFKOWITZ, HOWARD B. 1814-ALBERTA DR. WINTER PARK FL 92799- Street Address (P.O. Box Numbers) Suite, Apt. *, etc. City 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am lamiliar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO Address of Each General Partner. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City	ke check payable to: Dept. of	State (See rever	Fee Required	
WINTER PARK FL 22709 Street Address (P.O. Box Numbers) Suite, Apt. *, etc. City 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized agent. I am lamiliar with, and accept the obligations of section 620,192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO Address of Each General Partner. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City	If changed, new Registered	d Agent/Office		
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A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNER MUST BE REGISTERED AND ACTIVE WITH TO A CONNOT Use Post Office Box Numbers) 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. Ci	egistered under the laws of the y its general partner(s). I here	eby accept the e	a, submits this statem ppointment of register	
11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. Ci	SHIP OR OTHE	R BUSIN	IESS ENTIT	
LEFKOWITZ, HOWARD B. 1314 ALBERTA DR. WINTER		11c.	Registration/ Document Number	
	, State & Zip Code			
	r. State & Zip Code PARK FL 32789 -			
	900002: -01/16	0600 /9701/ 78.25)194)26006 ****\$76.25	
Note: General partners MAY NOT be changed on this form; an amendment m 12. If do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is deemed exe	900002: -01/16	060C /9701/ 78.25) 1 9 <)26006 ****\$76.25	

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effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee