

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC -7 PM 2:22

1. Name of Limited Partnership
SUNNY REALTY ASSOCIATES, LTD.

1a. DOCUMENT #
A20951



Mailing Address 8731 N. 30TH ST. APT. A TAMPA FL 33612		Principal Office Address 8731 N. 30TH ST. APT. A TAMPA FL 33612		3. Date Formed or Registered 10/10/1985	5a. Capital Contributions as Shown on record. \$361,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 11/14/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date:
City & State		City & State		6. FEI Number 59-2614409	
Zip	Country	Zip	Country	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent GHALY, SAMIRA 1348 SUMMERLIN DRIVE CLEARWATER FL	10. If changed, new Registered Agent/Office	
	Name	
	Street Address (P.O. Box Number Is Not Acceptable)	
	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) _____ 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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
GHALY, SAMIRA	8701 NORTH LARKHALL P	TAMPA FL 33603	700002708237--2
GHALY, BOULIS	48-24 59TH STREET	WOODSIDE NY 11377	12/09/88--0116--012
GHALY, MICHEL	48-24 59TH STREET	WOODSIDE NY 11377	***526.25 ***526.25
WAHBA, EMILE	141-52 76 ROAD	FLUSHING NY 11367	
BOULOS, ATEF	42 DOMINIC DRIVE	ROCKAWAY NJ 07866	
GUIRGUIS, FAWZI MD	43 KENSINGTON AVENUE	JERSEY CITY NJ 07304	

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 Samira Ghaly - General Partner DATE 11-30-98

Typed or Printed Name of General Partner Signing Form Samira Ghaly Daytime Telephone Number (813) 989-3725

CR2E003 (8/98)