


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

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>98 SEP 16 AM 10:49</p>	
1. Name of Limited Partnership MERRITT ISLAND MART PLAZA, LTD.		1a. DOCUMENT # A22488			
Mailing Address <i>David Krue</i> % EDWARD WACKS FINANCIAL CORP. 8181 W. BROWARD BLVD. SUITE 350 PLANTATION FL 33324		Principal Office Address <i>David Krue</i> % EDWARD WACKS FINANCIAL CORP. 8181 W. BROWARD BLVD. SUITE 350 PLANTATION FL 33324		3. Date Formed or Registered 05/05/1986 3a. Date of Last Report 11/05/1997 4. State or Country of Formation FL 6. FEI Number 59-2669915 7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		5a. Capital Contributions as Shown on record. \$1,390,000.00 5b. Amount of Capital Contributions in FLORIDA to date:	
9. Name and Address of Current Registered Agent WACKS, EDWARD 8181 W. BROWARD BLVD. SUITE 350 PLANTATION FL 33324		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 33324			
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) <i>Edward Wacks</i> DATE <u>9/11/98</u>					
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) AMERICAN FINANCIAL REALT		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 100 SOUTH PINE ISLAND		11b. City, State & Zip Code PLANTATION FL 33324	
				11c. Registration/Document Number J07951 700002643607--4 -09/18/98--01077--012 ****535.00 ****535.00	
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 <i>Edward Wacks, Pres American Financial Realty Group</i> DATE <u>9/11/98</u> Typed or Printed Name of General Partner Signing Form <u>Edward Wacks</u> Daytime Telephone Number _____					

CR2E003 (8/98)