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 # A22675

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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Stored Address (P.O. Box Number is Not Accepted \$704737=-01011=-0113 Suite. Apt A, etc. City FL Zip Code				News					
City FL 2ip Code 10a. Pursuant to the provisions of sections 620 1651 and 620 192, Florida Statutes, the above-nared innet 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. 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 PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of Cicneral Partner(s) 11a. Address of Each General Partner(s) 11b. City, State & Zip Code 11c. Registratory Document Number SEMBLER ENTERPRISES, INC. 5856 CENTRAL AVENUE ST. PETERSBURG FL V25013 V25013 V25013 V25013 V3 17 17 18 The independent of the Individual access. I further certify that the information supplied its deemed exempt from public access. I further certify that the information indicated on this samuel report is true and account on it than its against the property of the event heat the information supplied its deemed event of the Innited partnership, receiver or trustee employment of the Innited partnership, receiver or trustee employment of the Innited partnership, receiver or trustee employment of the Innited partnership, incidence on the Interpretation indicated on this samuel report is to an advanced to the Innited partnership, receiver or trustee employment of the Innited partnership, receiver or trustee employment to case at lumine certify that it am a General Partner of the Innited partnership, receiver or trustee employment to case at lumine certify that it am a General Partner of the Innited partnership, receiver or trustee employment to case at lumine certify that it am a General Partner of the Innited partnership, receiver or trustee employment to case at lumine certify that it am a General Partner of the Innited partnership, receiver or trustee employment to case at lumine certify that it am a General Par	5858 CENT	RAL AVENUE		Street Address (P.O. Box Number Is Not Accepted / 104/37 - 1110) 1 - 113 ***** 1 - 115 ****** 1 - 115 ****** 1 - 115 ******* 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 ****** 1 - 115 **** 1 - 115 **** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 **** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 **** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115 ***** 1 - 115					
10a. Pursuant to the provisions of sections 620 1051 and 620 1092. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Priorida, 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 620 132. Florida Statutes. SIGNATURE: (Hogistered 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. (Do NOT use Post Office Box Numbers). SEMBLER ENTERPRISES, INC. 5858 CENTRAL AVENUE. ST. PETERSBURG FL. V25013 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(R), Florida Statutes. I release the Division of Corporations from any liability of nony appliance with Section 119 07(3)(R) in the event that the Information supplied is deemed exempt from public access. I further certify that I am a General Partner of the Imited partnership, receiver or trustee empowered to execute this report is as a fund accounts of all that my signature has the legal effects as if made under cath. I further certify that I am a General Partner of the Imited partnership, receiver or trustee empowered to execute this report is a sourced by chapter of the Imited partnership, receiver or trustee empowered to execute this report is a sourced by chapter of the Imited partnership, receiver or trustee empowered to execute this report is a sourced by chapter of the Imited partnership, receiver or trustee empowered to execute this report is a sourced.								Zip Code	
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