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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

SIGNATURE Gunea &

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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1. Name of Limited Partnership	1a. DOCUMENT # A22740			30 HOT OU WILL			
BALAS, LIMITED							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
	·			06/13/1986	Shown on record.		
121 EMERALD KEY LANE PALM BEACH GARDENS FL 33418	121 EMERALD KEY LANE PALM BEACH GARDENS FL 33418			<b>3a.</b> Date of Last Report	\$709,791.90		
				09/22/1997	5b. Amount of Capital		$\dashv$
				4. State or Country of Formation	Contributions in FLORIDA to date:		
2. Mailing Address 121 EMERALD Key LANE	2a. Principal Office Address			FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number		Applied For	ヿ
City & State	City & State		NOT APPLICABLE		Not Applicable		
PALM BEAGE GARDEN, FL			7. Certificate of Status Desired		\$8.75 Additional Fee Required	$\neg$	
33418 Country	Zip Country		8. Make check payable to: Dept. of S	of State (See reverse side for fee information)			
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9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office				
BALAS, EUNICE			Street Address (P.O. Box Number Is Not Acceptable)				
121 EMERALD KEY LANE							
PALM BEACH FL 33418	Suite, Apt. #		#, etc.				
City			FL Zip & del				
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)							
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.						NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b.	1b. City, State & Zip Code		Registration/ Document Number	_
BALAS, EUNICE	121 EMERALD KEY LANE		PAL	PAL BEACH GARDENS FL			CR2E003 (8/98)
		!		7500000 12/07/9 *****	901:	1 <b>602</b> 166002 ****\$26.25	CR2E
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.							