FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT , TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A23773**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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alling Address	Principal Office Address	3. ^c	Date Formed or Registered	5a. Capi Shov	lal Contributions as vn on record.	
SS-PLYMOUTH OT-	-255-PLYMOUTH-ST.	12	12/11/1986 3a. Date of Last Report		\$4,500.00	
- O- BOX-271-	-PO-BOX-271-	3a.				
DDLEBOROUGH-MA 02346	-MIDDLEBOROUGH MA-02346		01/22/1997		5b. Amount of Capital Contributions in FLORIDA to date:	
A F A F	00	4. s	tale or Country of Formation	Cont to da	ributions in FLOHIDA te:	
P.O. Box 9/02	2a. Principal Office Address P.O. Dox 9102	м	ΙΔ			
ulte, Apt. #, etc.	Suite, Apt. #, etc.		El Number	1		
50. WALPALET	So. CUALPOLE City & State		4-2554914		Applied For Not Applicable	
MASS.	MASS.		ertificate of Status Desired			
p Country	Zip Country		erinicate of Statos Desireo		\$8.75 Additional Fee Required	
2071 U.S.A	02071 0.50	, 8. M	lake check payable to: Dept. of	State (See rev	erse side for fee informa	
Want and address of	rrent Régistered Agent	47		A A HORE		
A Same and Models of Ch	Name	10	. If changed, new Registere	d Agent/Office		
STRIAR, MICHAEL ESQ.						
1601 SHERIDAN STREET	Street Add	Street Address (P.O. Box Number Is Not Acceptable)				
SUITE 208	Suite, Apt.	# oto	V			
	Botto, ript.	P, OIC.				
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