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

98 NOV 18 AM 9: 23

1. Name of Limited Partnership	1a. DOCUMI A26046	ENT#	# 11/20				
STOR-ALL EQUITIES I, LTD.							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
1375 W, HILLSBORO BLVD. DEERFIELD BEACH FL 33442	1375 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442			03/04/1988 3a. Date of Last Report 09/24/1997 5b. Amount Contribu		M41,500.00	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date;		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 65-0057690	Applied For Not Applicable		
City & State Zip Country	City & State Zip Country			7. Certificate of Status Desired	×	\$8.75 Additional Fee Required	
				8. Make check payable to: Dept. of S	tate (See reve	rise side for fee information)	
9. Name and Address of Current Re	9. Name and Address of Current Registered Agent 10. If changed, new Re		10. If changed, new Registered	egistered Agent/Office			
ANDERSON, JEFFREY M 1375 WEST HILLSBORO BLVD. DEERFIELD BEACH FL 33442 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-nation for the purpose of changing its registered office or registered agent, or both, in the State of Fagent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.		Suite, Apt. #	FL				
A GENERAL PARTNER THAT IS	S A CORPORATION, L	IMITED	PARTN	IERSHIP OR OTHE	R BUSI	NESS ENTITY	
MUST	BE REGISTERED ANI	D ACTIV	E WITH	I THIS OFFICE.		Registration/	
11. Name(s) of General Partner(s) STOR-ALL EQUITIES, INC.	111a. (Do NOT Use Post Office Box Numbers 1375 W. HILLSBORO BLV		11b. City, State & Zip Code DEERFIELD BEACH FL		J29912		
				3000026 -11/24/9 ****53		33—1 72—012 ****535.00	
'							
Note: General partners MAY NOT b							
12. I do hereby certify that the information supplied with this: Corporations from any liability of non-compliance with 5e this annual report is true and accurate and that my signa empowered to execute this report as required by chapter	ection 119.07(3)(k) in the event that the info ture shall have the same legal effects as if	ormation supplie	ed is deemed	exempt from public access. I further o	ertify that the	information indicated on	

SIGNATURE		DATE	
Typed or Printed Name of General Partner Signing Form LARRY W. AN	derson V.P./G.	P. Daylime Telephone Number 954-42/	-7888