

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 30 AM 8:06

mtm 1/7



1. Name of Limited Partnership	1a. DOCUMENT # A28316
YUSEM HOMES-BOCA RATON, LTD.	

Mailing Address 1600 N.W. 2ND AVE., STE 16 BOCA RATON FL 33431	Principal Office Address 1600 N.W. 2ND AVE., STE 16 BOCA RATON FL 33431	3. Date Formed or Registered 05/11/1989	5a. Capital Contributions as Shown on record. \$10.00
		3a. Date of Last Report 10/18/1995	5b. Amount of Capital Contributions in FLORIDA to date: 10.00
		4. State or Country of Formation FL	
2. Mailing Address	2a. Principal Office Address	6. FEI Number 65-0118512	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
City & State	City & State	8. Make check payable to: Dept. of State (See reverse side for fee information)	
Zip	Country		

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
YUSEM, HENRY H 1600 NW 2ND AVE., #16 BOCA RATON FL 33432	Name
	Street Address (P.O. Box Number Is Not Acceptable)
	Suite, Apt. #, etc.
	City
	FL Zip Code

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) _____ 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. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
H.Y. (BOCA RATON), INC.	1600 N.W. 2ND AVE., #	BOCA RATON FL	K87520
H.W. (BOCA RATON), INC.	1600 N.W. 2ND AVE., #	BOCA RATON FL	K87522
R.Y. (BOCA RATON), INC.	1600 N.W. 2ND AVE., #	BOCA RATON FL	K87521

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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 [Signature] DATE 12/12/96
President of H.Y. (BOCA RATON), INC.

CR2E003 (3/96)