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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

NATIONAL DEVELOPERS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

^{18.} A28847 **DOCUMENT #** SECRETARY OF STATE DIVISION OF CORPORATIONS

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Mailing Address 1824 33RD STREET ORLANDO FL 32839 2. Mailing Address	Principal Office Address 1924 33RD STREET ORLANDO FL 32839 28. Principal Office Address		3. Date Formed or 09/05/1989 3a. Date of Last Re 04/08/1997 4. State or Country	pport	5a. Capital Contributions as Shown on record. \$288.00 5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	·		<u> </u>	Applied For Not Applicable	
Zip Country	Zip	Zip Country		us Desired	\$8.75 Additional Fee Required of State (See reverse side for fee Informati	
9. Name and Address of C	10. If changed, new Registered Agent/Office Name					
JOE POZO JR. 1924 33RD STREET ORLANDO FL 32839		Street Address (P.O. Box Number Is Not Acceptable) Sulte, Apt. #, etc. City FL Zip Code				
10a. Pursuant to the provisions of sections 620.10 for the purpose of changing its registered off agent. I em familiar with, and accept the oblining signature (Registered Agent Accepting Appointme A GENERAL PARTNER TH	lice or registered agont, or both, in the State of i gations of section 620.192, Florida Statutes.	Florida. Such char	ge was authorized by its general p	partner(s). I hereby	accept the appointme	ent of registered
11. Name(s) of General Partner(s)	11a. Address of Each Gen		11b. City, State & Zip		110 Reg	istration/ ent Number
P.A.P., INC.	1924 33RD STREET			10022 -09/10/9 ****156	K99292 2399610 79701124002	
Note: General partners MAY N	 NOT be changed on this for	rm; an ame	endment must be fil	ed to chan	ge a general	partner.
12. I do hereby certify that the information supplied Corporations from any liability of non-compliance	with this filing is valuetarily furnished and does	not qualify for the	exemption stated in Section 119.0	07/3)/k). Florida Stat	tutes. I release the Div	vision of

ils annual report is true and accurate and that my expature 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 appowered to execute this report as required by charter 620, Florida Statutes.

SIGNATURE