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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS 97 JAN -6 AM 10: 24 DOCUMENT # 1. Name of Limited Parmership 29650 Sabal lake Booa, Ho. 3. Date Formed or Registered Capital Contributions as Shown on record. Clo DMI 441 S. Federal Highway Deerfie 1d Beach, Florida CODINI 441 S. Federal Haprosy Deerfield Beach, Floridg 3a. Date of Last Report **5b.** Amount of Capital Contributions in FLORIDA to date 4. State or Country of Formation 2. Mailing Address Principal Office Address Suite, Apt. #, etc. Suite, Apt. #, etc 6. FEI Number Applied For Not Applicable 65-17540 City & State City & State \$8.75 Additional Fee Required Zio Country Zio Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Suhanden Kenneth 441 S. Federal Highway Street Address (P.O. Box Number Is Not Acceptable) Dearseld Beach, FC 33441 Suite, Apt. #, etc. Zip Code 10a. Pursuant to the provisions of Sections 620 1051 and 620 192. Flor da Statutes, the above-harned limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered of color registered agent, or both in the State of Florida. Such change was authorized by its general partner(s). I nereby accept the appointment of registered agent Tam familiar with and accept the obligations of section 620 192. Flor de Statutes SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE

11a. Address of Each General Partner (Do NO1 Use Post Office Box Numbers) Registration/ 11. 11c. 11b. City, State & Zip Code

Dear Re 10 Beach, FL 3344

Forum F.I., Inc. | 6365 NW 614 Wy Fl. Landerdele, 11

1 00002 059651 ----01/18/97--01007--017 JU2059651--5 -01/18/97--01007--017 ****\$76.25 *****576.25 &

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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), Fforida Statutes. Trelease the Division of Corporations from any limitify 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 each. 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 Statut

SIGNATURE ,

Typed or Printed Name of General Parties Signing Form | Kuwery

Daytime Telephone Number