## 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

1. Name of Limited Partnership

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

1a. DOCUMENT# A9300000612

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 22 AM 8: 31

	A9300000612			
OAKLAND PARK FESTIVAL CE	ENTRE LIMITED PART	NERSHIP		
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
C/O KONOVER & ASSOCIATES SOUTH, INC. 7000 WEST PALMETTO PARK ROAD. SUITE 408 BOCA RATON FL 33433	C/O KONOVER & ASSOCIATES SOUTH. INC. 7000 WEST PALMETTO PARK ROAD. SUITE 408 BOCA RATON FL 33433		06/10/1993 3a. Date of Last Report 01/08/1998	\$2,840,589.00  5b. Amount of Capitat Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		65-0415824 7. Certificate of Status Desired	☐ Not Applicable
Zip Country	Zip	Country		\$8.75 Additional Fee Required  le to: Dept. of State (See reverse side for fee information)
9 Name and Address of Current	Parallel and a second		40 //	
		Name		
ASHENFELTOR, MARIA C/O KONOVER & ASSOCIATES SOUTH		Street Address (P.O. Box Number Is Not Acceptable)		
7000 WEST PALMETTO PARK ROAD, SUITE 408		Suite, Apt. #, etc. 00002735160-0		
BOCA RATON FL 33433		-01/08/9901095016 city ****526.25 *****526.25		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or re agent. I am familiar with, and accept the obligations	gistered agent, or both, in the State of Florid	l d limited partnership o da. Such change was	organized or registered under the laws of the authorized by its general partner(s). I hereby	State of Florida, submits this statement accept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointment)			DATE	
A GENERAL PARTNER THAT	IS A CORPORATION, L BE REGISTERED AN	IMITED PAID ACTIVE V	RTNERSHIP OR OTHE	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner 444		11c. Registration/
KONOVER MOBILE, INC.	7000 W. PALMETTO PARK		BOCA RATON FL 33433	L82258
*				
•				
Note: General partners MAY NOT	be changed on this form	; an amendn	nent must be filed to cha	nge a general partner.
12. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with S this annual report is true and accurate and that my sign empowered to execute this report as required by chapte	Section 119.07(3)(k) in the event that the info ature shall have the same legal effects as if	rmation supplied is de	semed exempt from public access. I further o	ertify that the information indicated on