	ATTLE DOC	LORIDA DEPARTMENT OF ST	ATE	FILED LL ARY OF STATE F CORPORATIONS (2/6	
ANNUAL REPORT		Sandra Mortham	DIVISION O	ARY OF STATE	
1997		Secretary of State DIVISION OF CORPORATION	96 DEC	2 PM 12: 18	
1. Name of Limited Partnership	1a. DOCUMENT # A9300000766				
INE-TAI-STERLING PARK, LI	· · · · · · · · · · · · · · · · · · ·				
Mailing Address	Principal Office Address		3, Date Formed or Registered	58. Capital Contributions as Shown on record	
5100 HOWELL BRANCH RD. WINTER PARK FL 32792			07/27/1993 38. Date of Last Report	\$1,000-00	
			04/02/1996	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		FL 6. FEI Number		
City & State	City & State		59-3181917	🖵 Applied For	
-		Country	7. Certificate of Status Desired	<b>\$8.75</b> Additional Fee Required	
Zip Country	Zip	Country	8. Make check payable to: Dept. of State (See reverse side for fee information		
9. Name and Address of Curr	ent Registered Agent		10. If changed, new Registr	arad Agent/Office	
SIU, RACHEL		Name			
5100 HOWELL BRANCH RD. WINTER PARK FL 32792			Street Address (P.O. Box Number Is Not Acceptable)		
			Suite, Apt. #, etc.		
				FL	
10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligat SIGNATURE (Registered Agent Accepting Appointment)	or registered agent, or bo tions of section 620, 192, F	oth, in the State of Florida. Such cha lorida Statutes.	nge was authorized by its general partner(s). I h	TE	
A GENERAL PARTNER THA	<u>ST BE REGIS</u>	TERED AND ACTIV	E WITH THIS OFFICE.		
11. Nome(s) of General Partner(s)	11a. (Do No	dress of Each General Partner DT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
FINE-TAI FLORIDA DEVELOPMENT	ELOPMENT 5100 HOWELL BRANCH RO		WINTER PARK FL 32792	P92000002145	
•			-12/0	20234185 )9/8601029005 *576.25 ****576.25	
•					
Note: General partners MAY NO					
12. I do hereby certify that the information supplied w Corporations from any liability of non-compliance this annual report is true and accurate and that m empowered to execute this report as required by	with Section 119.07(3)(k) i y signature shall have the	in the event that the information sup same legal effects as if made under	blied is deemed exempt from public access. I fi	urther certify that the information indicated on	
CIONATURE X Romald	F-C M	bul	0.175	11/6 /96	
SIGNATURE A WINALA		<u> </u>	DATE	-++-/-////////	

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