

FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 FEB 13 PM 1:48

1. Name of Limited Partnership	1a. DOCUMENT # A93000000836
LENDALE, LTD.	



Mailing Address 1390 N.E. 173RD STREET NORTH MIAMI BEACH FL 33162		Principal Office Address 1390 N.E. 173RD STREET NORTH MIAMI BEACH FL 33162		3. Date Formed or Registered 08/12/1993	5a. Capital Contributions as Shown on record. \$5,059,000.00
				3a. Date of Last Report 12/30/1996	5b. Amount of Capital Contributions in FLORIDA to date:
				4. State or Country of Formation FL	
2. Mailing Address	2a. Principal Office Address	6. FEI Number 65-0429246 <input type="checkbox"/> Applied For <input checked="" 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
ATRIUM REGISTERED AGENTS, INC. 1500 SAN REMO AVE., SUITE 125 CORAL GABLES FL 33146	Name First National Bank of South Miami
	Street Address (P.O. Box Number Is Not Acceptable) 5750 Sunset Drive
	Suite, Apt. #, etc. PO Box 431000
	City South Miami FL Zip Code 33143

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.

David M. Graul

SIGNATURE (Registered Agent Accepting Appointment)

DATE **2/6/98**

**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
PIANKO, LEONARD	1390 N.E. 173RD STREE	NORTH MIAMI BEACH FL	
100002432831--1 -02/17/98--01054--018 ****526.25 ****526.25			

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

Leonard Piansko

DATE **2/6/98**