## 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** 

DOCUMENT #

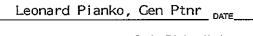
FILED M. 10/28 98 OCT 26 AM 8:55

Name of Limited Partnership	<sup>1</sup> A9300000	A93000000836			SECRETARY OF STATE TALLAHASSEE FLORIDA			
LENDALE, LTD.								
Mailing Address	Principal Office Address	Principal Office Address			5a. Capit	al Contributions as		
-1330 N.E. 173RD STREET				08/12/1993	\$5,059,000.00			
-NORTH MIAMI BEACH FL 30162	NORTH MIAMI BEACH PL 3316	2		3a. Date of Last Report	ψυ,(	203,000.00		
				02/13/1998 4. State or Country of Formation	5b. Amor Cont	ant of Capital ibutions in FLORIDA		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address			to da	te:		
5750 Sunset Drive								
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0429246	Applied For Not Applicable			
City & State	City & State	City & State		7. Certificate of Status Desired				
South Miami, FL Zip Country	Zip	Zip Country		Certificate of Status Desired	\$8.75 Additional Fee Required			
Zip Country 33143				8. Make check payable to: Dept. of State (See reverse side for fee information)				
9 Name and Address of Cur	10, if changed, new Registered Agent/Office							
		Name						
FIRST NATIONAL BANK OF SOUTH FLORIDA			Street Address (P.O. Box Number Is 100 Acceptable 1 2 6 7 4 8 1 7					
5750 SUNSET DRIVE			<u>-10/28/9801084005</u>					
SOUTH MIAMI FL 33143		Suite, Apt. #, etc.		****526.25 ****526.25				
		City		,	FL	Zip Code		
10a. Pursuant to the provisions of sections 620.105' for the purpose of changing its registered office agent. I am familiar with, and accept the obligate	or registered agent, or both, in the State of F	lorida. Such chan	ership organ ge was aut	orized by its geogral partner(s). I hereby	accept the ap	pointment of registered		
SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THA	First Hatianal Rank of South	Miner	I IH	DATE	9-20	3-98		
A GENERAL PARTNER THA MU	AT IS A CORPORATION, IST BE REGISTERED A	,"L'IMITED ND ACTIV	Í ÞART VE WIT	NERSHIP OR OTHE TH THIS OFFICE.	R BUSI	NESS ENTITY		
11. Name(s) of General Partner(s)	11a. Address of Each Gen (Do NOT Use Post Office	eral Partner Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number		
PIANKO, LEONARD		1390 N.E. 173RD STREE		rth Miami Beach Fl		tono tono		
[								
-					l			
Note: General partners MAY NO								
12. I do hereby certify that the information supplied wi	ith this filing is voluntarily furnished and does	not qualify for the	exemption s	tated in Section 119.07(3)(k), Florida St	atutes. I relea	se the Division of		

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 cath. 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.

Typed or Printed Name of General Partner Signing Form

SIGNATURE.



Daytime Telephone Number