## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9300000962** 

34TH STREET PARTNERSHIP, LTD.

empowered to execute this report as required by chapter 620. Fregida Statutes.

NOHRA

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 MAR 25 PM 3: 18



Maling Address  106 SW 10TH STREET GAINESVILE FL 32001  2. Malling Address  3. Deter Formation FL  5. Determination FL  5. Determination FL  6. Determination FL  7. Certification of Solution D							
2. Malling Address Sulte, Apt. #, etc. Sulte,	106 SW 10TH STREET	106 SW 10TH STREET			09/17/1993 3a. Date of Last Report 03/11/1996	\$200.00  \$200.00  5b. Amount of Capital Contributions InFLORIDA	
City & State  Country  Country  Country  Country  Country  Country  To C	2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address			to date;	
City & State  City & State  City & State  City & State  To Country  Country  To Country  T	Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				
Eight Country    Page   Registration   Page   Page	City & State	City & State	City & State		Not Applicabl		
LONDONO, NOHRA H  106 SW 10TH STREET  GAINESVILLE FL 32601  Street Addiess (P.O. Box Number is Not Acceptable)  Street Addiess (P.O. Box Number is Not Acceptable)  Surte, Apt. 4, etc.  City  FL Zip Code  Total Street Addiess (P.O. Box Number is Not Acceptable)  Surte, Apt. 4, etc.  City  FL Zip Code  Total Street Addiess (P.O. Box Number is Not Acceptable)  Surte, Apt. 4, etc.  City  FL Zip Code  The purpose of changing its registered apend, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered apend in the familiar in, and accept the obligations of section 820 192, 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 the appointment of registered apend in the familiar hand advanced by its general partner(s). I hereby accept the appointment of registered apend in the familiar hand acceptable of the appointment of registered apend in the familiar hand appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend in the purpose of the appointment of registered apend apend in the purpose of the appointment of registered apend	Zip Country	Zip	Zip Country		Fee Required		
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Condition of the provisions of sections \$20,1051 and \$20,1052. 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 charging its registered office or registered agent, or both, in the State of Florida. Such charge was authorized by its general partner(s). Thereby accept the appointment of registered agent are familiar with, and accept the obligations of section \$20,192, Florida 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.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner (b) Numbers  11b. City, State & Zip Code  11c. Registration Document Number  LONDONO, N  106 SW 10TH STREET  GAINESVILLE FL 32601  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. Iso 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)(b), Florida Statutes. I release the Division of	9. Name and Address of Cu	10. If changed, new Registered Agent/Office					
Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zip Code  Today  FL  Zip Code  Florida. Submits his statement to the profit of the Sinter Separate agent ag	LONDONO NOHBA H		Name V				
QAINESVILLE FL 32801  Suite, Apt. #, etc.  City  FL  Zip Code  Fl  Zip C	106 SW 10TH STREET						
Total 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 his registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the obligations of section 620.192, Florida 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.  **11.** Name(s) of General Partner(s)  **Iname(s) of General Partner(s)  **I							
10a, Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named imited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its 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 are marked agent accepting Appointment).  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. (DO NOT Use Post Office Box Numbers)  LONDONO, N  106 SW 10TH STREET  GAINESVILLE FL 32601  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. 1do hereby certify that the information supplied with this filing is volunterily furnished and does not qualify for the exemption stated in Section 11.0.07(3)(s), Florida Statutes, I release the Division of							
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.  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.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner  LONDONO, N  106 SW 10TH STREET  GAINESVILLE FL 32601  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.			City FL Zip Code				
LONDONO, N  106 SW 10TH STREET  GAINESVILLE FL 32601  200002 1 2 5 4 5 2 - 3 -03/27/9701118002  *****158. 25 *****156. 25  Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  12. Ido 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	the purpose of changing its registered office or I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THA	registered agent, or both, in the State of Fiori I section 620.192, Florida Statutes.  AT IS A CORPORATION	, LIMITED	PART	od by its general partner(s). I hereby at	ccept the appointment of registered agent.	
LONDONO, N  106 SW 10TH STREET  GAINESVILLE FL 32601  20002125492-3 -03/27/97-01118-002 *****156.25  Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  12. Ido 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	11. Name(s) of General Partner(s)	11a. Address of Each Ger	neral Partner Box Numbers)	11b.	City, State & Zip Code		
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12. I do hereby certify that the Information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Division of	•				200002 -03/27 ****1!	1264623 /9701118002 56.25 ****156.25	
12. I do hereby certify that the Information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Division of	Note: General partners MAY N	OT be changed on this fo	rm; an am	endmer	nt must be filed to cha	inge a general partner.	
	12. I do hereby certify that the information supplied w	rith this filing is voluntarily furnished and does	not qualify for the	exemption st	ated in Section 119.07(3)(k), Florida S	tatutes. I release the Division of	

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