

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO 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

97 SEP 23 AM 10:19

1. Name of Limited Partnership

1a. DOCUMENT #
A93000001205

PWR INVESTMENT GROUP, LTD.



Mailing Address

1533 US HIGHWAY 19
HOLIDAY FL 34691-5650

Principal Office Address

5008 GRAND BLVD.
NEW PORT RICHEY FL 34652

3. Date Formed or Registered

11/19/1993

3a. Date of Last Report

11/08/1996

5a. Capital Contributions as
Shown on record.

\$200.00

5b. Amount of Capital
Contributions in FLORIDA
to date

3000002303963--6
-09/29/97--01112--014

2. Mailing Address

2a. Principal Office Address

1533 US 19 North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HOLIDAY, FL

Zip

Country

Zip

Country

34691-5650 PASCO

6. FEI Number

59-3208857

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

RICKEY, MARC V
1533 US HIGHWAY 19
HOLIDAY FL 34691

10. If changed, new Registered Agent/Office

Name

PETER V. PIPITONE

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

HOLIDAY

FL

34691-5650

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.

SIGNATURE (Registered Agent Accepting Appointment)

[Signature]

DATE

9/12/97

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

RICKEY, MARC V

2716 QUIET HOLLOW COW

NEW PORT RICHEY FL 34

Peter V. Pipitone

1533 US 19 N.

HOLIDAY, FL 34691

ARTHUR WEISS

1533 US 19 N.

HOLIDAY, FL 34691

JOHN W. SERAPPO

1533 US 19 N

HOLIDAY, FL 34691

dec

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

[Signature]
PETER V. PIPITONE

DATE

9/12/97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

813-942-4177

CR2E003 (6/97)