


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

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| LIMITED PARTNERSHIP ANNUAL REPORT 1999 | |  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 15 PM 12:50 | |
| 1. Name of Limited Partnership L&J DEVELOPMENT, LTD. | | 1a. DOCUMENT # A94000000002 | | | |
| Mailing Address 1001 NW 62ND ST. #104 FT LAUDERDALE FL 33309 | | Principal Office Address 1001 NW 62ND ST. #104 FT LAUDERDALE FL 33309 | | 3. Date Formed or Registered 12/22/1993 3a. Date of Last Report 10/24/1997 4. State or Country of Formation FL | |
| 2. Mailing Address 1001 NW 62ND ST. Suite, Apt. #, etc. D 320 City & State FORT LAUDERDALE, FL Zip Country 33309 USA | | 2a. Principal Office Address 1001 NW 62ND ST. Suite, Apt. #, etc. SUITE 320 City & State FORT LAUDERDALE, FL Zip Country 33309 USA | | 5a. Capital Contributions as Shown on record. \$980.00 5b. Amount of Capital Contributions in FLORIDA to date: <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 7. Certificate of Status Desired <input type="checkbox"/> \$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 NOBIL, JAMES H 1001 NW 62ND ST #104320 FT LAUDERDALE FL 33309 | | 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code | | | |
| 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) _____ DATE _____ | | | | | |
| 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) LJ INVESTORS, INC. | | 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 185 WEST CEDAR ST., S 1585 Frederick Blvd Akron Ohio 44320 | | 11b. City, State & Zip Code AKRON OH 44307 44320 200002720852--7 -12/23/98--01053--024 ****141.25 ****141.25 | |
| 11c. Registration/Document Number P93000088421 | | | | | |
| 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 _____ Typed or Printed Name of General Partner Signing Form _____ | | DATE 12/2/98 Daytime Telephone Number _____ | | | |

CR2E03 (8/98)