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

## LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

SECRETARY OF STATE DIVISION OF CORPORATIONS

City & State  City & State  7. Certificate of Status Desired  \$8.75 Addition  8. Make check payable to: Dept. of State (See reverse side for fee info  9. Name and Address of Current Registered Agent  Name  MCCRORY, J. WALTER  1512 EAST BROWARD BLVD., SUITE 200  FORT LAUDERDALE FL 33301  Suite, Apt. #, etc.  City  FL  Zip Code  10a. Pursuant to the provisions of sections 820.1051 and 620.192, Florida Statules, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this state 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 Statules.  SIGNATURE (Registered Agent Accepting Appointment)  DATE  AGENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  Registration/	1999 🤻	DIVISION OF C	ORPORATIO	NS	98 0	EC 11	AM O. T.	
Making Address Principal Office Address   Sa. Capital Contributions as Shown on record.   Sa. Capital Contributions as Shown on record.   Sa. Capital Contributions as Shown on record.   Shown on record.	1. Name of Limited Partnership	1a. DOCUM A9400000	ENT # 0098			,	нп 8: 28	
Mailing Address Principal Office Address 1512 EAST BROWARD BLVD. SUITE 200 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301  2. Mailing Address 2. Za. Principal Office Address FL Suite, Apt. #, etc. City & State Country Co	31, LTD.							
1512 EAST BROWARD BLVD. SUITE 200 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301  2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Gity & State City & State City & State Country Country Country Country To	Mailing Address	Principal Office Address	·			5a. Capi	tal Contributions as	$\neg$
2. Mailing Address  2a. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  To Country				3a. Date of Last Report	\$10,000.00			
2a. Principal Office Address  Suite, Apt. #, etc.  City & State  City & State  City & State  To Country  Zip  Country  Zip  Country  Zip  Country  To Countr						Cont	ributions in FLORIDA	
City & State  Country  To	2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address					
Zip Country Zip Country 7. Certificate of Status Desirad \$8.75 Addition Fee Requires 8. Make check payable to: Dept. of State (See reverse side for fee Info Record Registered Agent Portice) 8. Make check payable to: Dept. of State (See reverse side for fee Info Record Registered Agent Portice) 10. If changed, new Registered Agent/Office Record Record Registered Agent Portice Street Address (P.O. Box Number Is Not Acceptable)  FORT LAUDERDALE FL 33301  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 state 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 regist 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 ENT 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)  CASTLE LOCK, INC.  1512 EAST BROWARD BLV  FORT LAUDERDALE FL 33  P93000002807							Applied For Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee info  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  Name    MCCRORY, J. WALTER	City & State	City & State	-		7. Certificate of Status Desired		\$8.75 Additional	$\dashv$
MCCRORY, J. WALTER 1512 EAST BROWARD BLVD., SUITE 200 FORT LAUDERDALE FL 33301  Suite, Apt. #, etc.  City  FL  Zip Code  Total 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 registe 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 ENT 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 Numbers  P93000002807	Zip Country	Zip			8. Make check payable to: Dept. of State (See reverse side for fee information			
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Street Address (P.O. Box Number is Not Acceptable)  FORT LAUDERDALE FL 33301  Suite, Apt. #, etc.  City  FL  Zip Code  Toda.  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 state 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 regists agent. I am femiliar 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 ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner  11b. City, State & Zip Code  11c. Registration/ Document Numb  CASTLE LOCK, INC.  1512 EAST BROWARD BLV  FORT LAUDERDALE FL 33  P93000002807	8. Name and Address or Curre	am Registered Agent	Name		10. Il Gizilged, new Registered	Agentronice		
FORT LAUDERDALE FL 33301  Suite, Apt. #, etc.  City  FL  Zip Code  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 state 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 heraby accept the appointment of registered agent, I am femiliar 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 ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner (po NOT Use Post Office Box Numbers)  CASTLE LOCK, INC.  1512 EAST BROWARD BLV  FORT LAUDERDALE FL 33  P93000002807	· · · · · · · · · · · · · · · · · · ·	Street Address (P.O. Box Number is Not Acceptable)						
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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  1512 EAST BROWARD BLV  FORT LAUDERDALE FL 33  P93000002807	A GENERAL PARTNER THA	T IS A CORPORATION, ST BE REGISTERED AN	LIMITED	PART /E WIT	NERSHIP OR OTHE	R BUSI	NESS ENTITY	7
CASTLE LOCK, INC. 1512 EAST BROWARD BLV FORT LAUDERDALE FL 33 P93000002807  20002717012		1 111	al Castana			11c.	Registration/ Document Number	
20002717012 -12/21/9301009-016 ****158.75 ****158.7				FOR	P93000002807		3000002807	(80/8/ 600)
					2000027 -12/21/3 ****19	70 98011 8.75	1123 103-016 ****158.75	CDOEC

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 To concern young the minimator supplied was this limit is vicinities and are desired in exemption stated in Section 11-0-7(5)(x), from a stated in Envisor of Corporations from any liability of non-compliance with Section 119,07(3)(x) in the event that the information supplied is deemed exempt from public access. I further certify the 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	-1/21	$\sim \sim 1$		Just	DATE	12-6-7	1
Typed or Printed Name of General F	Partner Signing Form	J WATE	n Mel	RORY	Daytime Telephone Number	354-462-	6/29
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