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

1. Name of Limited Partnership

DOCUMENT # **A94000000559**

97 DEC 16 PH 4: 42

SEUNI MAN GI SIMIL TALLAHASSEE.FLORIDA



FIDELITY PROPERTIES, LTD		1011/11 1010 1011 0111 0111 0111 0111			
,,,,				2/12/17	
Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
6665 CRISTINA MARIE DRIVE	6665 CRISTINA MARIE DRIVE		04/22/1994	\$200,000.00 5b. Amount of Cepital Contributions in FLORIDA to date:	
ORLANDO FL 32835	ORLANDO FL 32835	ORLANDO FL 32835			
			01/02/1997		
2. Mailing Address	28. Principal Office Address	28. Principal Office Address			
				\$200,000	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	☐ Applied For	
City & State	Cily & Stato		59-3237237	Not Applicable	
Zlp Country	Zip	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
			8. Make check payable to: Dept. of State (See reverse side for fee Informa		
9. Name and Address of Cui	rrent Registered Agent	T	10. If changed, new Registere	d Agent/Office	
HWANG, CHARLES 6865 CRISTINA MARIE DRIVE		Name			
		Streel Address (P.O. Box Number Is Not Acceptable)			
ORLANDO FL 32835		Suite, Apt. #, etc.			
		Cily		Zip Code	
				FL	
agent. I am familiar with, and accopt the onlig-	ar or registered agent, or both, in the State of Fid alions of section 620 192, Florida Statutos.	orida. Such change w	as authorized by its general partner(s). Ther	ne state of Frontia, submits this statement oby accept the appointment of registere	
SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THA		MUTED DA	DATE		
ML	IST BE REGISTERED AN	LIMITED PA	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
ML	JST BE REGISTERED AN	D ACTIVE	WITH THIS OFFICE.	11c. Registration/ Document Number	
ML	JST BE REGISTERED AN	ID ACTIVE ' a) Partner ox Numbers) 11	WITH THIS OFFICE.	Registration/	
ML Name(s) of General Partner(s)	JST BE REGISTERED AN 11a. Address of Each Goner (Do NOT Use Post Office Be	ID ACTIVE ' a) Partner ox Numbers) 11	WITH THIS OFFICE. b. City. State & Zip Code ORLANDO FL 32835	11c. Registration/ Document Number P94000010537	
ML Name(s) of General Partner(s)	JST BE REGISTERED AN 11a. Address of Each Goner (Do NOT Use Post Office Be	ID ACTIVE ' a) Partner ox Numbers) 11	WITH THIS OFFICE. b. City. State & Zip Code ORLANDO FL 32835	11c. Registration/ Document Number P94000010537	
ML Name(s) of General Partner(s)	JST BE REGISTERED AN 11a. Address of Each Goner (Do NOT Use Post Office Be	ID ACTIVE ' a) Partner ox Numbers) 11	WITH THIS OFFICE. b. City. State & Zip Code ORLANDO FL 32835	11c. Registration/ Document Number	

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 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee.

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

Chi Mars (MARLES HWANG

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

DATE Desember 10, 1997

Daylimo Telephone Number (401) 293 - 4/12