FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT

1997

WILMAR-B LIMITED PARTNERSHIP

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9400001351**

DIVISION OF CORPORATIONS
97 JAN -8 PM 12: 06



TE 200	3. Date Formed or Registered 10/01/1994 3a. Date of Last Report 01/02/1996 4. State or Country of Formation	5a. Capital Contributions as Shown on record. \$323,200.00 5b. Amount of Capital Contributions in FLORIDA to date:
	FL	
	6. FEI Number 65-6159078	Applied For Not Applicable
	7. Certificate of Status Desired	\$8.75 Additional
ry	8. Make check payable to: Dept_o	Fee Required I State (See reverse side for fee information)
	10. If changed, new Registers	and According to
10	I O. III Changed, new negasions	ou Agent/Onice
et Address (P.C	P.O. Box Number Is Not Acceptable)	
Suite, Apt. #, etc.		
•		FL Zip Code
CTIVE W	DATE RTNERSHIP OR OTHE VITH THIS OFFICE.	
bers) 11b), City, State & Zip Code	11c. Registration/ Document Number
	FT LAUDERDALE FL 3330	P94000089705
	600002 -01/16 *****	011107-620 678-25 /011107-620 678-25 /014576-25
		-01/16 -01/16 ****

Daytime Telephone Number