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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

. DOCUMENT # A94000001410

DIVISION OF CORPORATIONS 96 DEC 11 PH 3:53



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JOHN E. ABREO, JR. AND ED PARTNERSHIP	JACQUELINE H. ABREO	LIMIT	1914 11 11 11 19 19 19 19 19 19 19 19 19 19	1841 1844 1844 1845 HAV 1846 HAV 1844 184	
Mailing Address 21086 SHADY VISTA LANE BOCA RATON FL 33428	Principal Office Address 21086 SHADY VISTA LANE	•		5a. Capital Contributions as Shown on record. \$9,229,608.00	
500.151101.12.00150	555X 18115X 12 55-125			5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address			to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable	
City & State	City & State				
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		10, If changed, new Registered Agent/Office Name			
ABREO, JOHN E JR.					
21086 SHADY VISTA LANE		Street Address	(P.O. Box Number Is Not Acceptable)		
BOCA RATON FL 33428		Suite, Apt. #, etc.			
		City		FL Zip Code	
	051 and 620.192, Florida Statutes, the above-named flice or registered agent, or both, in the State of Flori ligations of section 620.192, Florida Statutes.				
SIGNATURE (Registered Agent Accepting Appointm			DATE		
A GENERAL PARTNER TH	HAT IS A CORPORATION, L IUST BE REGISTERED AND	O ACTIVE	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bo	Partner x Numbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number	
ABREO, JOHN E JR.	21086 SHADY VISTA LAN	٧	BOCA RATON FL 33428		
ABREO, JACQUELINE H	21086 SHADY VISTA LAI	V	BOCA RATON FL 33428		
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•.			700002	0304773 /96-01064007 76,25 ****576,25	
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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 each. 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 John E. aluno	\mathcal{L}
Typed or Printed Name of General Partner Signing Form Joll N	É.
Typed of Finited Name of General Partition Signing Forth	

Daytime Telephone Number <u>561-451-0103</u>