


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		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 JAN 20 AM 11:06	
1. Name of Limited Partnership		1a. DOCUMENT # A95000000122			
STANLEY YOUNG FAMILY LIMITED PR.					
Mailing Address 3353 NW 74 AVE MIAMI FL 33122		Principal Office Address 3353 NW 74 AVE MIAMI FL 33122		3. Date Formed or Registered FLORIDA 01/24/1995	
				3a. Date of Last Report 12/31/96	
2. Mailing Address		2a. Principal Office Address		4. State or Country of Formation FLORIDA	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number 65-0552744	
City & State		City & State		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip Country		Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information)	
				5a. Capital Contributions as Shown on record. 1,000.000	
				5b. Amount of Capital Contributions in FLORIDA to date:	

9. Name and Address of Current Registered Agent NELSON, BARRY ESQ NELSON + LAFEMINA P.A. 19495 BISCAYNE BLVD STE 609 AVENTURA FL 33180-2320		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) STANLEY YOUNG FAMILY HOLDING	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3353 NW 74 AVE	11b. City, State & Zip Code MIAMI FL 33122	11c. Registration/ Document Number R94000092701
--	--	---	---

200002420542--7
-02/03/98--01096--021
****526.25 ****526.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner

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 in 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

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number