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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED PARTNERSHIP FLORIDA DEPARTMENT OF STATE Sandra Mortham ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS 96 DEC 30 AM 7: 59 1. Name of Limited Partnership CLOSET TEAM, LTD. Capital Contributions as Shown on record. 3. Date Formed or Registered Mailing Address Principal Office Address 01/25/1995 17556 LAKE ESTATES DRIVE 17556 LAKE ESTATES DRIVE \$1,000.00 BOCA RATON FL 33496 BOCA RATON FL 33496 **5b.** Amount of Capital Contributions in FLORIDA to date 4. State or Country of Formation 000.00 2. Mailing Address 2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 65-0536718 🖪 Applied For 🖵 Not Applicable City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zio Cauntry Country 8. Make check payable to. Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name BREGMAN, HOWARD 17556 LAKE ESTATES DRIVE Street Address (P.O. Box Number Is Not Acceptable) **BOCA RATON FL 33496** Suite Apt. # etc. Zio 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 Fiorida, submits this statement for the purpose of onanging 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. (Do NOT Use Post Office Box Numbers) Registration/ 11. Name(s) of General Partner(s) City, State & Zip Code 11c. CLOSET TEAM, INC. 17556 LAKE ESTATES DR BOCA RATON FL 33496 P94000087396 300002050353---01/08/\$7--01048--012 ****191.25 ****191.25

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

12. Ido 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

12. 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 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. Rorida Statutes.

SIGNATURE

THE TIBE

Marchet

DATE 11/12/96

CR2F003 (6/98)