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**

DOCUMENT #

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• Name of Limited Pannership	A95000000304		THE STATE OF THE S		
HILLSBORO COMMERCE PAF	RK LTD.		(170,571)110 (110,7)711 (01,17)		
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
C/O ABDO INVESTMENTS, INC. 7280 WEST PALMETTO PARK ROAD, SUITE 306 BOCA RATON FL 33433	C/O ABDO INVESTMENTS, INC. 7280 WEST PALMETTO PARK ROAD. SUITE 306 BOCA RATON FL 33433		03/06/1995 3a. Date of Last Report 01/03/1997	\$1,200,000.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	\$761,508.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		NOT APPLICABLE 7. Certificate of Status Desired	Not Applicable	
Žip Country	Zip Cour	ntry		\$8.75 Additional Fee Required State (See reverse side for fee Information)	
9, Name and Address of Current Registered Agent Name			10, If changed, new Registered Agent/Office		
COHN, ALAN B C/O ABRAMS, ANTON, ET AL 2021 TYLER STREET		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.			
HOLLYWOOD FL 33022		City Zip Code			
agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT	r registered agent, or both, in the State of Florida. S ns of section 620.192, Florida Statutes.	uch change was a	nuthorized by its general partner(s). I here DATE TNERSHIP OR OTHE	ne State of Florida, submits this statement aby accept the appointment of registered	
11. Name(s) of General Partner(s)	11a. Address of Each General Partn (Do NOT Use Post Office Box Num	er bers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
ABDO INVESTMENTS, INC.	7280 WEST PALMETTO PA		CA RATON FL 33433	\$60091	
			200002 *****S	40.25 ****501.25	
Note: Veneral partners MAY NOT	be changed on this form; ar	n amendme	ent must be filed to che	inge a general partner	
12. I do h - certify that the Information supplied with t	this filing is voluntarity furnished and does not qualiful Section 119.07(3)(k) in the event that the informati	v for the exemption	n stated in Section 119.07(3)(k). Florida:	Statutes I release the Division of	

this annual report is true and accurate and trist my signature shall have the same local 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 _

Typed or Printed Name of General Partner Sign

George Sabga 🛶

DATE 12/29/97

Daytime Telephone Number (561) 392-2777