

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 -5 PM 1:18

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000680

IMB HOLDINGS LIMITED



901/20

Mailing Address

Principal Office Address

**1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411**

**1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411**

3. Date Formed or Registered

04/24/1995

5a. Capital Contributions as Shown on record.

\$20,000.00

3a. Date of Last Report

12/23/1996

5b. Amount of Capital Contributions in FLORIDA to date.

4. State or Country of Formation

FL

6. FEI Number

NOT APPLICABLE

☐ Applied For
☒ Not Applicable

7. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

**1237 SW BLUE STEM WAY
SUITE, APT. #, etc.
STUART FL.
34997 MARTIN**

2a. Principal Office Address

**1237 SW BLUE STEM WAY
SUITE, APT. #, etc.
STUART FL.
34997 MARTIN**

9. Name and Address of Current Registered Agent

**HASELTON, RONALD
1768 GULFSTREAM WAY
WEST PALM BEACH FL 33411**

10. If changed, new Registered Agent/Office

Name **HASELTON RONALD**
Street Address (P.O. Box Number is Not Acceptable) **1237 SW BLUE STEM WAY**
Suite, Apt. #, etc.
City **STUART** FL **34997**

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, adopts 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 further 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)

Ronald Haselton

DATE **12/31/97**
*****243.75 *****243.75

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)

IMB HOLDING COMPANY

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

**1768 GULFSTREAM WAY
1237 SW BLUE STEM WAY**

11b. City, State & Zip Code

**WEST PALM BEACH FL 33
STUART FL.**

11c. Registration/Document Number

L23377

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 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 **IMB Holdings Company by Ronald Haselton Pres.**

DATE **12/31/97**

Typed or Printed Name of General Partner Signing Form **IMB Holdings Company**

Daytime Telephone Number **288-1197**

CR2E003 (6/97)