FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9500000844

FILED
Dec 16 1998 8:00 am
Secretary of State

ZEV HOLDINGS, LTD.						
Mailing Address C/O LINDA D. WACHTEL 7100 S.W. 7TH STREET PLANTATION FL 33317 2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	Principal Office Address C/O LINDA D. WACHTEL 7100 S.W. 7TH STREET PLANTATION FL 33317 2a. Principal Office Address Suite, Apt. #, etc. City & State Zip	C/O LINDA D. WACHTEL. 7100 S.W. 7TH STREET PLANTATION FL 33317 2a. Principal Office Address Suite, Apt. #, etc. City & State		ormed or Registered 5/1995 of Last Report 1/1997 Country of Formation nber 185813 te of Status Desired leck payable to: Dept. of S	5a. Capital Contributions as Shown on record. \$1,226,121.00 5b. Amount of Capital Contributions in FLORIDA to date: Applied For Not Applicable \$8.75 Additional Fee Required State (See reverse side for fee information)	
		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Lip Code med limited partnership organized or registered under the laws of the State of Florida, submits this statement lorida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered				
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAM 11. Name(s) of General Partner(s) WACHTEL, LINDA D		AND ACTIVE neral Partner a Box Numbers) 1	WITH THIS 1b. City, Sta	OFFICE. 10 8 Zip Code FL 33317	11c.	Registration/ Document Number

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

1 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 accupate 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 period as required by chapfer 620, Florida Statutes.

CIC	``	NTI	IRE
- 11	- 17/1	211	

Typed or Printed Name of General Partner Signing Form

-INDA D. WACHTE

Daytime Telephone Number 954-58

954-584-6086