

A95000000901



GARRETT GROUP

United States

384 S. Military Trail
Deerfield Beach, Florida 33442
(305) 480-8543 / fax: (305) 698-0057

United Kingdom

10-16 Cole Street
London SE 1 4YH
(071) 357-0367 / fax: (071) 357-0347

June 9, 1995

900001515989
-06/19/95--01007--014
****175.00 ****87.50

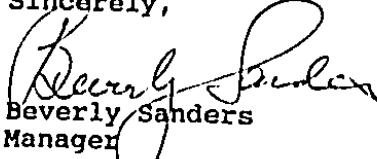
Secretary of State
Business Filing Division
409 E. Gaines St.
Tallahassee, FL 32399

Dear Sir/Madam:

Enclosed is a check for \$175.00 to cover the filing and registered agent fees for filing the ~~Barrong Limited Partnership~~ and the Janice M. Patterson Limited Partnership.

Please return completed forms to the address above.

Sincerely,


Beverly Sanders
Manager

FF \$52.50
RA- \$35.00

6/15/95aw

TALLAHASSEE, FL

FILED
1995 JUN 13
50

CERTIFICATE OF LIMITED PARTNERSHIP

OF

BERRONG LIMITED PARTNERSHIP

FILED
JUN 13 PM 1:50
TALLAHASSEE, FLORIDA

1. BERRONG LIMITED PARTNERSHIP A95000000901
(Name of Limited Partnership; must contain a suffix such as
"Limited", "Ltd.", or "Limited Partnership")
2. 360 S. Military Trail, Deerfield Beach, Fl 33442
(The Business Address of Limited Partnership)
3. Mark Lauer
(Name of Registered Agent for Service of Process)
4. 360 S. Military Trail, Deerfield Beach, Fl 33442
(Florida street address)
5. Mark Lauer
(Registered Agent must sign here to accept designation as
Registered Agent for Service of Process.)
6. 10532 Flora Verde Ct., Santee, CA 92071
(The Mailing Address of the Limited Partnership.)
7. The latest date upon which the Limited Partnership is to be
dissolved is December 31, 2060.
8.

NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
Nicole Berrong	10532 Flora Verde Ct. Santee, CA 92071
Jeffrey N. Berrong	10532 Flora Verde Ct. Santee, CA 92071

Signed this 3 day of June, 1991.

Signature of all general partners:

by: Nicole Berry
General Partner

General Partner

[Signature]
General Partner

General Partner

General Partner

General Partner

TALLAHASSEE, FLORIDA

1995 JUN 13 PM 1:50

FILED

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

FILED
JUN 13 PM 1:51
TALLAHASSEE, FLORIDA

BEFORE ME, the undersigned constituting all of the general partners of Berrong Limited Partnership, a Florida Limited Partnership certify as follows:

The amount of capital contributions to date of the limited partners is \$ 1,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$1,000.00.

This 3 day of JUNE, 1995.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

GENERAL PARTNER

Nicole Berrong

GENERAL PARTNER

Jeffrey N. Berrong

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Matheny
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JAN -4 PH 1:45
1/10

1. Name of Limited Partnership
1a. DOCUMENT #
A95000000901

BERRONG LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

State, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

State, Apt. #, etc.

City, State & Zip

Mailing Address
10532 FLORA VERDE CT.
SANTEE CA 92071

Principal Office Address
360 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442

3. Date Form or Registered in
FLORIDA
06/13/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record
\$1,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. Filing Number

15-0589203

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$5.75 Additional Fee required
for a Certificate of Status

8. FEES: 1. Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2. Supplemental Fee. \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$138.75 (\$52.50 + \$138.75) AND NO MORE THAN \$437.50 (\$437.50 + \$138.75).

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

LAUER, MARK
360 S. MILITARY TRAIL
DEERFIELD BEACH FL 33442

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1054 and 620.102, 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 620.102, Florida Statutes.

DATE

SIGNATURE (Registered Agent Accepting Appointment)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (If a Partnership, give Street Office or Box Number)	11b. City, State & Zip Code	11c. Registered Document Number
BERRONG, NICOLE	10532 FLORA VERDE CT.	SANTEE CA 92071	
BERRONG, JEFFREY N	10532 FLORA VERDE CT.	SANTEE CA 92071	

100001636231
-01/11/96--01019-019
****200.00 ****200.00
1/1/25 1/1/25

CR-EC03 (6/95)

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 119.02(3)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.02(3)(a) in the event that the information supplied is determined 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 607, Florida Statutes.

SIGNATURE

JEFFREY NEAL BERRONG

DATE

Telephone Number

760/259-9310

Typed or Printed Name of General Partner Signing Form

0014004