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

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1999 DIVISION OF CORPORATIONS

DOCUMENT #

FILED

98 DEC 11 AM 10: 28

		123	\ \\ \tag{5.1}	CREIAN LANASSEE, FLORIDA
NADLER INVESTMENTS, LTD	D.			
Mailing Address	Principal Office Address	Ē.	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
601 PINE LAKE DRIVE DELRAY BEACH FL 33445	601 PINE LAKE DRIVE DELRAY BEACH FL 33445		07/24/1995 3a. Date of Last Report 04/08/1998	\$60,000.00
				5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	io gate.
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6, FEI Number	Applied For
City & State	Cîty & State		65-0602500	Not Applicable
Zip Country	Zip	Country	7. Certificate of Status Desired 8. Make check payable to: Dest.	\$8.75 Additional Fee Required of State (See reverse side for fee information)
			O. Walte Glock payable to: Days.	S State (See [State 6 and 10] 145 Illustriation)
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
A Z REGISTERED AGENT CORPORATION 2601 SOUTH BAYSHORE DRIVE, SUITE 1600 MIAMI FL 33133		Street Address (P.O. Box Number is Not Acceptable)		
		Suite, Apt. #, etc.		
u.u. 1 2 00 100				
	or registered agent, or both, in the State of Florid	City d limited partners da. Such change	ship organized or registered under the laws of t was authorized by its general partner(s). I hen	FL Zip Code the State of Floride, submits this statement aby accept the appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeti SIGNATURE (Registered Agent Accepting Appointment)	or registered agent, or both, in the State of Florid ions of section 620.192, Florida Statutes.	d limited partners da. Such change	was authorized by its general partner(s). I hen	he State of Floride, submits this statement aby accept the appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeting SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THA	or registered agent, or both, in the State of Floridons of section 620.192, Florida Statutes.	d limited partners ta. Such change	was authorized by its general pertner(s). I hen	he State of Floride, submits this statement aby accept the appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeting SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THA	or registered agent, or both, in the State of Florid ions of section 620.192, Florida Statutes.	d limited partners ta. Such change	was authorized by its general pertner(s). I hen	he State of Floride, submits this statement aby accept the appointment of registered
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeting SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THA MU	or registered agent, or both, in the State of Floridons of section 620.192, Florida Statutes. AT IS A CORPORATION, L ST BE REGISTERED ANI Address of Each General	d limited partners ta. Such change	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE.	he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/ Document Number
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeti SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAMU 11. Name(s) of General Partner(s)	or registered agent, or both, in the State of Floricions of section 620.192, Florida Statutes. AT IS A CORPORATION, LIST BE REGISTERED ANI 11a. (Do NOT Use Post Office Bo	d limited partners ta. Such change	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code DELRAY BEACH FL 33445	he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/ Document Number
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeti SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAMU 11. Name(s) of General Partner(s)	or registered agent, or both, in the State of Floricions of section 620.192, Florida Statutes. AT IS A CORPORATION, LIST BE REGISTERED ANI 11a. (Do NOT Use Post Office Bo	d limited partners ta. Such change	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code DELRAY BEACH FL 33445	he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/ Document Number P95000053220
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeti SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAMU 11. Name(s) of General Partner(s)	or registered agent, or both, in the State of Floricitions of section 620.192, Florida Statutes. AT IS A CORPORATION, LIST BE REGISTERED ANI 11a. Address of Each General (Do NOT Use Post Office Bo 601 PINE LAKE DRIVE	d limited partners la. Such change LIMITED DACTIV I Partner x Numbers)	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code DELRAY BEACH FL 33445	FL he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/ Document Number P95000053220 27163170
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeting SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAM MU 11. Name(s) of General Partner(s) NADLER INVESTMENTS, INC.	or registered agent, or both, in the State of Floricions of section 620.192, Florida Statutes. AT IS A CORPORATION, LIST BE REGISTERED ANI 11a. Address of Each General Control of Pine Post Office Bo 601 PINE LAKE DRIVE Or be changed on this form this filing is voluntarily furnished and does not with Section 119.07(3)(k) in the event that the inty is signature shall have the same legal effects as for signature shall have signature shall be signatured to sign	d limited partners a. Such change LIMITED D ACTIV Partner x Numbers) n; an ame	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code DELRAY BEACH FL 33445 ODDOO2 -12/1 ***** Indiment must be filed to cleaning the control of the c	FL he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/Decument Number P95000053220 2716370—E1 8/98—01082—010 508.75 ****508.75 AL DEC 1 5 1998 nange a general partner. Statutes. I release the Division of er certify that the information indicated on
for the purpose of changing its registered office agent. I am familiar with, and accept the obligeting signature. I am familiar with, and accept the obligeting signature. SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAM MU 11. Name(a) of General Partner(s) NADLER INVESTMENTS, INC. NADLER INVESTMENTS, INC.	or registered agent, or both, in the State of Floricions of section 620.192, Florida Statutes. AT IS A CORPORATION, LIST BE REGISTERED ANI 11a. Address of Each General Control of Pine Post Office Bo 601 PINE LAKE DRIVE Or be changed on this form this filing is voluntarily furnished and does not with Section 119.07(3)(k) in the event that the inty is signature shall have the same legal effects as for signature shall have signature shall be signatured to sign	d limited partners a. Such change LIMITED D ACTIV Partner x Numbers) n; an ame	DAT PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code DELRAY BEACH FL 33445 ODDOO2 -12/1 ***** Indiment must be filed to cleaning the control of the c	FL he State of Floride, submits this statement aby accept the appointment of registered ER BUSINESS ENTITY 11c. Registration/Decument Number P95000053220 2716370—E1 8/98—01082—010 508.75 ****508.75 AL DEC 1 5 1998 nange a general partner. Statutes. I release the Division of er certify that the information indicated on