

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 3: 17



1. Name of Limited Partnership

1a. DOCUMENT #  
A95000001154

NORTHMARK VENTURE ENTERPRISES, LTD.

Mailing Address

33 N.E. 2ND STREET, SUITE 200  
FORT LAUDERDALE FL 33301

Principal Office Address

33 N.E. 2ND STREET, SUITE 200  
FORT LAUDERDALE FL 33301

3. Date Formed or Registered

07/31/1995

5a. Capital Contributions as  
Shown on record

\$125,000.00

3a. Date of Last Report

01/27/1997

5b. Amount of Capital  
Contributions in FLORIDA  
to date

4. State or Country of Formation

FL

2. Mailing Address

33 NE 2nd Street

Suite, Apt. #, etc.

Suite 210

City & State

Fort Lauderdale FL

Zip Country

33301

2a. Principal Office Address

33 NE 2nd Street

Suite, Apt. #, etc.

Suite 210

City & State

Fort Lauderdale, FL

Zip Country

33301

6. FEI Number

65-0599837

☐ 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)

9. Name and Address of Current Registered Agent

ROSEN, EVE WAGNER

33 NE 2ND STREET, #101

FT. LAUDERDALE FL 33301

10. If changed, new Registered Agent/Office

Name

500002405715-5

Street Address (P.O. Box Number Is Not Accepted)

01/20/98-01171-020

Suite, Apt. #, etc.

City

FL

Zip Code

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, 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 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

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)

NORTHMARK VENTURE MANAGEMENT

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

6700 NORTH ANDREWS AV

11b. City, State & Zip Code

FORT LAUDERDALE FL 33

11c. Registration/  
Document Number

P95000058887

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

DATE

12/31/97

Typed or Printed Name of General Partner Signing Form

NORTHMARK VENTURE

VP

MANAGER OF

6700 NORTH ANDREWS AV

Daytime Telephone Number

554-462-800

CR2E003 (6/97)