


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 APR -8 AM 11:45	
1. Name of Limited Partnership GROSS FAMILY LIMITED PARTNERSHIP #1, LTD.		1a. DOCUMENT # A95000001518			
2. Mailing Address 4602-Bayberry-Lane- Tamarac, FL--33319-3111		2a. Principal Office Address 5500 NW 69th Avenue, Suite, Apt. #, etc. Apt. #424 Lauderhill, FL 33319 U.S.		3. Date Formed or Registered 10/10/95	5a. Capital Contributions as Shown on record 3,000,000
2. Mailing Address 12 Cooper Road Suite, Apt. #, etc. Scarsdale, NY 10583 U.S.		2a. Principal Office Address 5500 NW 69th Avenue, Suite, Apt. #, etc. Apt. #424 Lauderhill, FL 33319 U.S.		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date: 3,000,000
				4. State or Country of Formation Florida	
				6. FEI Number 65-0643520	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
				7. Certificate of Status Desired <input type="checkbox"/> \$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 PAUL S. LABINER 2255 Glades Road, Suite 422A Boca Raton, FL 33431				10. If changed, new Registered Agent/Office Name GAYE MOELIS Street Address (P.O. Box Number is Not Acceptable) 4534 Hazleton Lane Suite, Apt. #, etc. City Lake Worth FL Zip Code 33467	
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) <i>Gaye Moelis</i> DATE 3/10/98					
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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number		
SHIRLEY GROSS, Trustee of the SHIRLEY GROSS Revocable Trust, dtd. 07/25/96	5500 NW 69th Ave., Apt. #424	Lauderhill, FL 33319	400002488704--0 -04/14/98-01098-012 ****541.25****541.25 4-10		
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 <i>Shirley Gross</i> DATE 3/10/98 Typed or Printed Name of General Partner Signing Form SHIRLEY GROSS Daytime Telephone Number (954)747-7788					

CR2E003 (6/97)