


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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  97 SEP 25 AM 11:34	
1. Name of Limited Partnership		1a. DOCUMENT # <b>A95000001809</b>			
L. C. BREWER & ASSOCIATES LIMITED PARTNERSHIP					
Mailing Address  243 SHORE DR. E. MIAMI FL 33133		Principal Office Address  243 SHORE DR. E. MIAMI FL 33133		3. Date Formed or Registered  11/17/1995	
				3a. Date of Last Report  04/17/1997	
2. Mailing Address		2a. Principal Office Address		4. State or Country of Formation  FL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number  65-0623235	
City & State		City & State		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		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  FEUERMAN, JONATHAN THERREL BAISDEN & MEYER WEISS 1111 LINCOLN ROAD MALL, STE. 500 MIAMI BEACH FL 33139				10. If changed, new Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  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)		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b. City, State & Zip Code	
11c. Registration/ Document Number					
BREWER DUNNELLON, INC.		243 SHORE DRIVE EAST		MIAMI FL 33133	
P95000089472					
600002307026- -5 -09/29/97--01130--021 ***156.25 ***156.25					
KWM					
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		Nancy E. Benouaich		DATE 9-5-97	
Typed or Printed Name of General Partner Signing Form		Nancy E. Benouaich		Daytime Telephone Number (305) 856-1220	

CR2E003 (6/97)