

A95000001942

UNITED PARTNERSHIP
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 DEC 28 AM 9:00

SECRETARY OF STATE
TALLAHASSEE



1. Name of Limited Partnership MASON FAMILY LIMITED PARTNERSHIP		1a. DOCUMENT # A95000001942	
Mailing Address 1515 SOUTH FLAGLER DR. #TS-3 WEST PALM BEACH FL 33401	Principal Office Address 1515 SOUTH FLAGLER DR. #TS-3 WEST PALM BEACH FL 33401	3. Date Formed or Registered 12/08/1995	5a. Capital Contributions as Shown on record. \$850,000.00
		3a. Date of Last Report 01/08/1997	5b. Amount of Capital Contributions in FLORIDA to date: \$850,000.00
		4. State of Country of Formation FL	
2. Mailing Address 90 Rebekah Abben Suite/Apt. #, etc. 941 NW 49 Way City & State Coconut Creek, FL Zip 33063	2a. Principal Office Address 130 Bryn Mawr Dr. Suite/Apt. #, etc. City & State Lake Worth, FL Zip 33460	6. FEI Number 65-0625492 <input checked="" 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 SCIARRETTA, STEVEN A ESQ. 2300 GLADES RD., STE. 302E BOCA RATON FL 33431	10. If changed, new Registered Agent/Office Name Rebekah Abben, CPA Street Address (P.O. Box Number Is Not Acceptable) 941 NW 49 Way Suite, Apt. #, etc. City Coconut Creek Zip Code FL 33063
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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) Rebekah G. Abben, CPA DATE 4-3-99

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) MASON, PAUL	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1515 SOUTH FLAGLER DR 130 Bryn Mawr Dr.	11b. City, State & Zip Code WEST PALM BEACH FL 33460 Lake Worth, FL 33460	11c. Registration/Document Number 600003088266--0 -01/05/00--01008--006 ***205258-01205250 REINSTATEMENT
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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 Paul A. Mason GEN PTRN DATE 4/3/99

Typed or Printed Name of General Partner Signing Form Paul Mason Daytime Telephone Number (954) 978-3536