FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION **AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

AKERS AWAY, LTD.

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DOCUMENT # A96000000609

SECRETARY OF STATE DIVISION OF CORPORATIONS

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Mailing Address 1721 SW 68 AVE. PLANTATION FL 83317	Principal Office Address 1721 SW 68 AVE. PLANTATION FL 33317		3, Date Formed or Registe 03/26/1996 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$465,300.00			
2. Malling Address	2a. Principal Office Address		4. State or Country of Form				
				# 465,300.00			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apr. #, etc.		633 Applied For			
City & State	City & State	City & State		Trott application			
Zip Country	Zip	Zip Country		Certificate of Status Desired Sa.75 Additional Fee Required Received to Dept. of State (See reverse side for fee information)			
9. Name and Address of C	current Registered Agent		10. If changed, new F	Registered Agent/Office			
STAIR, DARYL L 1721 SW 68 AVE. PLANTATION FL 33317		Name					
					City		
					10a. Pursuant to the provisions of sections 620.10 the purpose of changing its registered office I am familiar with, and accept the obligations	or registered agent, or both, in the State of Florida	ned limited partne a. Such change v
		SIGNATURE (Registered Agent Accepting Appointme				DATE	
A GENERAL PARTNER TH	IUST BE REGISTERED AN	ND ACTIV	PARTNERSHIP OR C VE WITH THIS OFFICE	i,			
11. Name(s) of General Partner(s)	11a. Address of Each Gene	ral Partner Box Numbers)	11b. City, State & Zip Code	11c. Registration/			
STAIR'S MANAGEMENT, INC.	1721 SW 68 AVE.			695923			
				gl 3-12			
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Note: General partners MAY	NOT be changed on this for	m; an am	endment must be filed t	to change a general partn			

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 ampowered to execute this report as required by chapter 620, Florida Statules.

SIGNATURE _

Typed or Printed Name of General Partner Signing Form

DARYL STAIR

Daylime Telephone Number 954 - 581 - 6200