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

SIGNATURE X

Typed or Printed Name of General Partner Signing Form

FILED 98 JUN 30 PM 3: 25

1. Name of Limited Partnerstop	1a. DOCUMENT# A9600000894		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
LEL PARTNER	S, LTD.				
Maling Address	Principal Office Address		3. Date Formed or Registered 5-8-96 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$4,624 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 90 HARBOR NAY	2a. Principal Office Address		4. State or Country of Formation	\$ 4624	
Suite, Apt. #, etc. City & State	Suite. Apt. #, etc. City & State		6. FEI Number	Applied For Not Applicable	
BAL HARBOR, FORIDA Zip Country 33154 USA	7(p)	Country	7. Certilicate of Status Desired 8. Make check payable to Dept. of	\$8.75 Additional Fee Required State (See reverse side for fee information in the second seco	tion)
Name and Address of Current Registered Agent Name		Norse	10. If changed, new Registered Agent/Office		
		Suite, Apt. #, etc. City ****141.6 dimited partnership organized or registered under the laws of the State of Florida, subm.ts this statement and Such change was authorized by its general partner(s). I hereby accept the appointment of registered DATE			
A GENERAL PARTNER THAT IS MUST F	A CORPORATION, L BE REGISTERED AND			R BUSINESS ENTIT	Y
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box	Partner 11k	Cily, State & Zip Code	11c. Registration/ Decument Number	
Lewis Mittiman Revocable Trust, Lewis Mittman Trustee	90 Harbor Way	80	1 Harbor, FC 33154		2E003 (6/97)
Lillian Mittman Revocable The Lillian Mittman Trustee	90 Harber Way	Ba	1 Harbor, FC 331SY		G. C.
•			dec		
Note: General partners MAY NOT be	e changed on this form	; an amendr	nent must be filed to cha	inge a general partner	<u>. </u>
 I do hereby certify that the information supplied with this fit Corporations from any liability of non-compliance with Sec this annual report is true and accurate and trial my infinate empowered to execute this report as required the employer. 	ction 119 07(3)(k) in the event that the info ure shall have the same legal effects as it	ormation supplied is o	deemed exempt from public access. I furthe	er certify that the information indicated	