FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUÁL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A96000001320

FILED 96 SEP 17 PH 4: 29 SECRETARY OF STATE TALLAHASSEE, FLORIDA



THE DANPATI LIMITED	97 jg p		I TADINIK KOTO MUHA BILIH BAHLI BAKK BAKK BUKK BUKH BUKH HABA AKKU IMBIN DAK NODI L					
Mailing Address 4855 VELASOUEZ PENSACOLA FL 32504	Principal Office Address 4855 VELASOUEZ PENSACOLA FL 32504		CM	3, Date Formed or Registered 07/12/1996 38, Date of Last Report	\$1	5a. Capital Contributions as Shown on record. \$150,000.00		
Mailing Address Suite, Apt. #, etc.		2a. Principal Office Address Suite, Apt. #, etc.			4. State or Country of Formation FL 150, ov. c 6. FEI Number			
City & State	City & State				Applied For Not Applicable			
Zip Country	Zip	Zip Country			7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
Q Name and Addre	as of Current Registered Agent			10. If changed, new Register	red Agent/Office		_	
KAHN, HARRY D JR. 4855 VELASQUEZ PENSACOLA FL 32504		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt #, etc. City FL Zip Code						
for the purpose of changing its regist agent. I am familiar with, and accept SIGNATURE (Registered Agent Accepting Ap	R THAT IS A CORPORATION MUST BE REGISTERED A	I Florida. Such ehan LIMITED AND ACTIV	ge was aut	horized by its general partner(s). I he	ereby accept the a	ppointment of registers	ed	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Offi	eneral Partner ce Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number		
KAHN, HARRY D JR.	4855 VELASQUEZ	4855 VELASQUEZ		ENSACOLA FL 32504			(96/9) 8	
12. I do hereby certify that the information s Corporations from any liability of non-co this annual report is true and accurate a	4855 VELASQUEZ MAY NOT be changed on this for supplied with this filling is voluntarily furnished and do ompliance with Section 119.07(3)(k) in the event that the and that my signature shall have the same legal effect quired by chapter 620. Florida Statutes.	es not qualify for the he information supp	endme exemption lied is deer	nt must be filed to cl stated in Section 119.07(3)(k), Flori ned exempt from public access. I fur	nange a ge la Statutes I releat	se the Division of e information indicated	on	
SIGNATURE Det	ricia B. Kahn			DATE	9/12/96		_	
Typed or Printed Name of General Partner Sign	ning Form PATRICIA B. K.	<u> </u>		Daytime Telephone Number	904-43	2-7989		