FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998

SEMBLER E.D.P. PARTNERSHIP #6, LTD.

this annual report is true and accurate and that my signature

empowered to execute this report as

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A96000001464 Para los la

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SECRETARY OF STATE TALL THASSEE FLORIDA



Malling Address Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record	
5658 CENTRAL AVE. ST. PETERSBURG FL 33707			08/06/1996	\$113,850.00	
	OI. PETEROSORIO TE SOTO		3a. Date of Last Report 02/27/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Malling Address	28. Principal Office Address		4. State or Country of Formation	# 113,850.00	
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. FEI Number	☐ Applied For	
City & State	City & State		59-3400036 7. Certificate of Status Desired	Not Applicable \$8.75 Additional	
Žip Country	Zip	Zip Country		8. Make check payable to: Dept. of State (See reverse side for (oe information)	
9. Name and Addre	ss of Current Registered Agent	<u> </u>	10. If changed, new Registers	ed Agent/Office	
SHER, CRAIG H		Namo			
5858 CENTRAL AVE.		Streel Address (P.O. Box Number Is Not Acceptable)			
ST. PETERSBURG FL 33707		Suite, Apt #, etc.			
		City		FL 7ip Code	
for the purpose of changing its regists egent. I am familiar with, and accept to SIGNATURE (Registered Agent Accepting App		ida. Such change w	as authorized by its general partner(s). The	eby accept the appointment of registered	
A GENERAL PARTNER	R THAT IS A CORPORATION, L MUST BE REGISTERED AN	D ACTIVE	WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	Partner 11 x Numbers)	b. City, State & Zip Code	11c. Registration/ Document Number	
SEMBLER RETAIL, INC.	5858 CENTRAL AVE.		ST. PETERSBURG FL 337	P9\$000003312	
			000002 -12/23 *****5	P9/00003312 3804503 /9701056017 50.00 ****550.00	
		K	12/15/9-	7	
Note: General partners Ma	AY NOT be changed on this form	; an amend	ment must be filed to cha	ange a general partner.	
12. I do hereby certify that the information su	applied with this filing is voluntarily furnished and does not	I qualify for the exer	nption stated in Section 119.07(3)(k), Florida	Statutes, I release the Division of	

raig Sher, President

have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or truster

Daytime Telephono Number 813-384-6010