## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SECRETARY OF STATE DIVISION OF CORPORATIONS

99 FFR - 3 PH 1: 02

1. Name of Limited Partnership	<sup>1</sup> A960000014	67"	35168 3 111 1.02			
BRENNER FAMILY LIMITED	PARTNERSHIP #2, LTD.					
Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.		
6908 PARISIAN WAY	6908 PARISIAN WAY		08/02/1996	1		
LAKE WORTH FL 33467	LAKE WORTH FL 33467			\$400,000.00  5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable		
City & State	City & State	City & State		\$8.75 Additional Fee Required		
Zip Country	Zip C	ountry	8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee information)		
9. Name and Address of Cu	rrent Registered Agent		10. If changed, new Registere	d Agent/Office		
LABINER, PAUL S 2255 GLADES ROAD, SUITE 422A BOCA RATON FL 33431		Name Street Address (P.O. Box Number Is Not Acceptable) Sulte, Apt. #, etc.  City Zip Code				
agent. I am familiar with, and accept the obligated SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THAT	e or registered agent, or both, in the State of Florida ations of section 620.192, Florida Statutes.	Such change w	as authorized by its general partner(s). I hereb	by accept the appointment of registered		
11. Name(s) of General Partner(s)	11a. Address of Each General P		1b. City, State & Zip Code	11c. Registration/ Document Number		
WILLIAM BRENNER, TRUSTEE	6908 PARISIAN WAY		LAKE WORTH FL 33467			
MURIEL BRENNER, TRUSTEE	6908 PARISIAN WAY		LAKE WORTH FL 33467			
				27707572 9/9901132005 141.251 *****141.25		
Note: General partners MAY N	OT be changed on this form;	an amen	dment must be filed to ch	ange a general partner.		
,12. I do hereby certify that the information supplied w		ualify for the exer	nption stated in Section 119.07(3)(k), Florida S	Statutes. I release the Division of		

.12.	I do hereby certify	that the informa	tion supplied wit	h this filing Is volu	ntarily furnished and	does not qualify	for the exemption state	d in Section 119.07(3)(k	), Florida Statute	s. I release the Divi	sion of
	Corporations from	any liability of n	on-compliance v	ith Section 119.0	7(3)(k) in the event th	at the information	on supplied is deemed e	exempt from public acces	ss. I further certif	y that the information	on indicated on
1	this annual report	is true and accur	rate and that my	signature shall he	ave the same legal of	fects as if made	under oath. I further ce	rtify that I am a General	Partner of the lin	nited partnership, re	sceiver or trustee
	empowered to ex	ecute this report	as required by c	hapter 620, Florid	a Statutes.						_

SIGNAT	URE	
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DATE 12/30/98 2/1/99
Daytime Telephone Number (561)965-6333