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

LIMITED PARTNERSHIP ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 28 PM 2: DE

1. Name of Limited Partnership	1a. DOCUMENT # A96000001836				///	2- 00		
ALTMAN PARTNERS, LTD.								
Mailing Address 2201 CORPORATE BLVD N.W SUITE 200 BOCA RATON FL 33431	Principal Office Address 2201 CORPORATE BLVD N.W SUITE 200 BOCA RATON FL 33431		3. Date Formed or Registered 10/03/1996		5a. Capital Contributions as Shown on record.			
				1. Date of Last Report 12/18/1997 State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:			
2. Mailing Address	2a. Principal Office Address			FL				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FEI Number 65-0696657	<u>, </u>	Applied For Not Applicable		
City & State	City & State		7.	Certificate of Status Desired				
Zip Country	Zip	Country	8.	#526.25 Make check payable to: Dept. of S	\$8.75 Additional Fee Required State (See reverse side for fee information)			
9 Name and Address of Current R		10 If changed pow Poplatored	1 0 monti Office					
	egistered Agent	Name	10. If changed, new Registered Agent/Office Name					
BROAD AND CASSEL		Street Address (P.O. Box Number Is Not Acceptable)						
BOCA PATON EL 22424		Suite, Apt. #, e	Suite, Apt. #, etc.					
		City	FL Zp Code					
10a. Pursuant to the provisions of sections 620,1051 and 6 for the purpose of changing its registered office or reg agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	istered agent, or both, in the State of Flor				State of Florida,			
A GENERAL PARTNER THAT I	S A CORPORATION, I BE REGISTERED AN	IMITED P	PARTNE WITH	RSHIP OR OTHE	R BUSIN	ESS ENTITY		
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office B	al Partner ox Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number		
The Altman Companies, In	an Companies, Inq.		BOCA F	ATON FL. 33431	F9800 3 8362	0003787 Max		
				7000027 -01/12/2 /} /*****52		578 53019 ***526.25		
				12/21	Max			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filling 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 logal affects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee approximately accorded to execute this proof as reported by Chanter 520, Florida Statutes 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 logal affects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee and accurate and that my signature shall have the same logal affects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee and accurate and that my signature shall have the same logal affects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee and accurate and that my signature shall have the same logal affects as if made under oath. I further certify that I am a General Partner of the limited partnership and the limited partnershi

O1	LAT	CI 1	RE	

Joel L Altman, Chairman/CEO

Daytime Telephone Number 561-997-8661

DATE 11/24/98

CR2E003 (8/98)