

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 SEP 18 PM 1:20

1. Name of Limited Partnership

1a. DOCUMENT #  
A96000002128

TABIN HOLDINGS, LTD.



Mailing Address

21551 HALSTEAD DRIVE  
BOCA RATON FL 33428

Principal Office Address

21551 HALSTEAD DRIVE  
BOCA RATON FL 33428

3. Date Formed or Registered

11/18/1996

5a. Capital Contributions as  
Shown on record.

\$3,000,000.00

3a. Date of Last Report

02/12/1998

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

380,000.00

4. State or Country of Formation

FL

6. FEI Number

65-0713850

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

3533 N.W. 61<sup>ST</sup> CIRCLE  
Suite, Apt. #, etc.

2a. Principal Office Address

3533 N.W. 61<sup>ST</sup> CIRCLE  
Suite, Apt. #, etc.

City & State

BOCA RATON FL

Zip 33496 Country U.S.A.

City & State

BOCA RATON FL

Zip 33496 Country U.S.A.

9. Name and Address of Current Registered Agent

HMT CAPITAL, INC.  
21551 HALSTEAD DRIVE  
BOCA RATON FL 33428

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

3533 N.W. 61<sup>ST</sup> CIRCLE

Suite, Apt. #, etc.

City

BOCA RATON

FL

Zip Code

33496

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Madeline Tabin, Pres. HMT Capital, Inc. 9/15/98

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

HMT CAPITAL, INC.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

21551 HALSTEAD DRIVE

11b. City, State & Zip Code

BOCA RATON FL 33428

11c. Registration/  
Document Number

P98000088883

500002645795--7  
-09/22/98--01040--005  
\*\*\*\*526.25 \*\*\*\*526.25

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

2. I do hereby certify that the information supplied with this filing 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 legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Madeline Tabin, Pres. HMT Capital, Inc.

DATE

9/15/98

Typed or Printed Name of General Partner Signing Form

Madeline Tabin

Daytime Telephone Number

(561) 999-9553

CR2E003 (8/98)