## 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** 

1. Name of Limited Partnership

**DOCUMENT #** A96000002222

## THE PANZARELLA FAMILY LIMITED PARTNERSHIP

FILED 98 OCT -2 AM IO: 20



Mailing Address  9050 PINES BLVD., BUITE 450-F PEMBROKE PINES FL 33024	Principal Office Address  9050 PINES BLVD SUITE 450-F PEMBROKE PINES FL 33024		3. Date Formed or Registered  12/05/1996  3a. Date of Last Report  03/16/1998  4. State or Country of Formation	5a. Capital Contributions as Shown on record. \$10,000,000.00  5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		FL		
Suite, Apt. #, etc.	Sulte, Apt. #, etc.		6. FEI Number 65-0715051	Applied For	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country		8, Make check payable to: Dept. of S	Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10, If changed, new Registered Agent/Office		
GONZALEZ, DON P.A. 9050 PINES BLVD., SUITE 450-F PEMBROKE PINES FL 33024		Name			
		Street Address (P.O. Box Number Is Not Acceptable)			
		Sulfe, Apt. #, etc.			
		City FL Zip Code			
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)			DATE		
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)	11a. Address of Each General     (Do NOT Use Post Office Box	Pariner Numbers)	11b. City, State & Zip Code	11C. Registration/ Document Number	
The new name of General Partner is PANZARELLA FAMILY INVESTMENTS, INC. The articles of Amendment were filed on 7/15/98 making such change.	9050 PINES BLVD., SUI		PEMBROKE PINES FL 330  9000263 -10/07/9 *****528	<b>P93</b> 000077805 S-2495 S-01099001 S-25 ****\$26.25	
			des		

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 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

Albert Panzarella. Presidentavima Tale

mber (954) 432-1699