

A9600000 2507

THE HERBERT AND MIRIAM LAZAR FAMILY PARTNERSHIP, LTD.
5805 S. BAYBERRY LANE
TAMARAC, FLORIDA 33319

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-07/13/98--01091--007
*****35.00 *****35.00

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

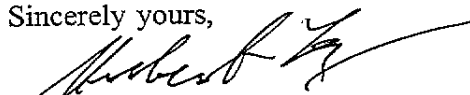
Re: Change of Registered Agent
The Herbert and Miriam Lazar Family Partnership, Ltd.
Our File No. 5079.01

Gentlemen:

Enclosed for filing please find an original of the above-referenced Statement of Change of Registered Agent and Office, together with a check made payable to the Department of State in the amount of \$35.00 to cover the filing fee.

Should you require any additional information, please do not hesitate to contact me.

Sincerely yours,


Herbert Lazar, General Partner

/jec
Enc.

FILED
98 JUL 13 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Change
LFT
7-17-98

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. The Herbert and Miriam Lazar Family Partnership, Ltd.
Name of the limited partnership

2. December 27, 1996
Date of filing/registration in Florida

3. A96000002507
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Elliot P. Borkson, Esq.

Name

200 E. Las Olas Blvd., #1900

Address

Ft. Lauderdale, FL 33301

City, State and Zip

5. The name and address of the new registered agent and/or office:

Herbert Lazar

Name

5805 S. Bayberry Lane


Florida street address (P.O. Box not acceptable)

Tamarac, FL 33319

City, State and Zip

6. Such ~~change(s)~~ was/were authorized by the general partners.


Signature of General Partner Miriam Lazar


Herbert Lazar

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.


Signature of Registered Agent Herbert Lazar

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00

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