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 DEC 11, PM 12: 27

				20 0 LC 14	11116.61	
1. Name of Limited Partnership	1a. DOCUM A9700000					
CHEINTAL FAMILY, LIMITED						
Mailing Address	Principal Office Address		3. Date Formed or Regi	stered 5a. Cap	ital Contributions as wn on record.	
4462 VIOLET AVENUE	4462 VIOLET AVENUE		05/01/1997	1	\$950,000.00	
SARASOTA FL 34233	SARASOTA FL 34233		3a. Date of Last Report	\$		
			12/31/1997	5b. Amo	unt of Capital tributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Fo	rmation to da	to date;	
				93	0,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		. <u>.</u>	Applied For	
City & State	City & State	City & State			☐ Not Applicable	
Zip Country	Zip Country		7. Certificate of Status D		\$8.75 Additional Fee Required	
			8. Make check payable t	o: Dept. of State (See rev	erse side for fee information)	
9. Name and Address of Current	Registered Agent		10. If changed, new	Registered Agent/Office		
SHEINTAL, JONATHAN		Name				
4462 VIOLET AVENUE		Street Address (P.O. Box Number Is Not Acceptable)				
SARASOTA FL 34233		Suite, Apt. #, etc.				
		City	<u>.</u>	FL.	Zíp Code	
10a. Pursuant to the provisions of sections 620,1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	egistered agent, or both, in the State of Flor			laws of the State of Flori		
A GENERAL PARTNER THAT	IS A CORPORATION,	LIMITED	PARTNERSHIP OR	OTHER BUS	NESS ENTITY	
MUST	T BE REGISTERED AN	ID ACTIV	E WITH THIS OFFIC	<u>E. ,</u>	Registration/	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office B		11b. City, State & Zip Code	11c.	Document Number	
SHEINTAL HOLDING CORP.	4462 VIOLET AVENUE	4462 VIOLET AVENUE		P9	7000038951	
				102722 12/24/98-0 ****528.25	3488 1085019 ****526.25	
						

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 flability 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 ceth. 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.

SIGNATURI	= _
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Typed or Printed Name of General Partner Signing Form