FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

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SECLURARY OF STAR

1. Name of Limited	d Partnership	1a. DOCUM A9700000		TALLARASSEE FLORIDA		
ALPERN P	PARTNERS, LTD.					
Malling Address		Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
6768 10TH AVENUE NORTH 6768 10TH AVENUE NORTH				05/12/1997 3a. Date of Last Report \$2,000,000.00		
LAKE WORTH FL 33467		LAKE WORTH FL 33467	LAKE WORTH FL 33467		\$2,000,000.00	
				N/A	5b. Amount of Capital Contributions in FLORIDA	
2. Malling Addre	286	2a. Principal Office Address		4. State or Country of Formation	to date:	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			Applied For	
City & State		City & State	City & State		Not Applicable	
Žip	Country	7ip	Country	7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (Soo reverse side for fee Information)		
9, Name and Address of Current Registered Agent			10. If changed, now Registered Agent/Office			
HALPERN, JACK 6768 10TH AVENUE NORTH LAKE WORTH FL 33487			Namo Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc			
			City FL 7ip Code			
for the purpo agent. I am f	ose of changing its registered offu familiar with, and accept the oblig	51 and 620.192, Florida Statutes, the above-nar ice or registed agent, or both, in the State of F gations of sedion 620.192, Florida Statutes		as authorized by its general partner(s). I here	eby accept the appointment of registered $\sqrt{\sqrt{5}/9}$	
	red Agent Accepting Appointmen	AT IS A CORPORATION,	MITED PA	RTNERSHIP OR OTHE		
V APINPII		UST BE REGISTERED AI	ND ACTIVE V		IT DOSINESS ENTITY	
11. Name(s) o	of General Partner(s)	Address of Each Gene (Do NOT Use Post Office	eral Partner Box Numbers) 111	b. City, State & Zip Code	11c. Registration/ Document Number	
HALPERN, JA	ICK	6768 10TH AVENUE NO	DR I	LAKE WORTH FL 33647		

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

12. I do horeby 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), Fiorida 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 the my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 620. Firitial Statutes.

SIGNATURÉ

HALPERN, HOWARD M

Typed or Printed Name of General Partner Signing Form

17 ST. GEORGES ROAD

****541.25 ****541.25

Daytimo Telophone Number

EAST BRUNSWICK NJ 088