FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9700001093

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P.S. PROPERTIES OF TAMPA, LTD.) (2019)) Jeno Jenis Jenis Berix Berix Berix Berix Berix Berix Itali Berix Jenis Jenis Jenis Jenis Jenis Jenis		
Mailing Address \$012 LEMON STREET	Principal Office Address 5012 LEMON STREET TAMPA FL 33609		3. Date Formed or Registered 05/16/1997	5a. Capital Contributions as Shown on record \$50,000.00	
TAMPA FL 33609			3a. Date of Lest Report 12/15/1997	5b. Amount of Capital Contributions in FLORIDA to date.	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59 - 25 / APPLIED FOR	3 6 95 Applied For	
City & State	City & State	City & State		\$8.75 Additional	
Zip Country	Zip Country		7. Certificate of Status Desired 8. Make check payable to Dept	Fee Required ale to Dept of State (See reverse side for (ee information)	
9. Name and Address of C	Current Registered Agent		10. If changed new Registere	d Agent/Office	
STEINER, NELSON C 5012 LEMON STREET TAMPA FL 33609		Name Street Address (P.O. Box Number Is Not Acceptable) Suite: Apt #, etc.			
		City		EI Zip Code	
	051 and 620.192, Florida Statutes, the above-nam fice or registered agent, or both, in the State of Flo ligations of section 620.192, Florida Statutes.				
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
A GENERAL PARTNER TH	HAT IS A CORPORATION, MUST BE REGISTERED AI			ER BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bo		11b. City, Stale & Zip Code	11c. Registration/ Document Number	
STEINER, NELSON C	5012 LEMON STREET		TAMPA FL 33609		
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c			5~ ***** 3~12~9°	9:第四部第2回——2 6/9901102006 438.75 ****438.75	
Note: General partners MAY I	NOT be changed on this for	m: an ame	3-12-92	438.75 ****438.75	

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 play the same last early as if made under oath. I further certify that than a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Fighda Statutes.

SIG	NΔ	TII	RF
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Typed or Printed Name of General Partner Signing Form NEL

NELSON C. STEINER

DATE 2-23-99
Daytime Telephone Number (813) 289-0500