FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

ARNOLD LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A97000001250 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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Malling Address 2761 N.E. 6TH STREET POMPANO BEACH FL 33062		Principal Office Address 2761 N.E. 6TH STREET POMPANO BEACH FL 33062		3. Date Formed or Registered 06/05/1997	5a. Capital Contributions as Shown on record. \$2,200,000.00 5b. Amount of Capital Contributions in FLORIDA to date: \$2,200,000.00		
				38. Date of Lest Report 12/01/1997 4. State or Country of Formation			
2. Malling Address		2a. Principal Office Address		FL			
Suite, Apt. #, etc. Suite, Apt. #, etc.				6. FEI Number 65-0759772	Applied For Not Applicable		
		City & State		7. Certificate of Status Desired	Ø	\$8.75 Additional Fee Regulred	
Zip	Country	Zip Country		8. Make check payable to: Dept. of	8. Make check payable to: Dept. of State (See reverse side for fee information)		
	9. Name and Address of Current Re	pistered Apent	T	10. If changed, new Registere	d Agent/Office		
			Name				
ARNOLD, ONLEY E 2761 N.E. 6TH STREET			Street Address (P.O. Box Number is Not Acceptable)				
POMPANO BEACH FL 33062			Sulle, Apt. #, etc.				
			City		FL	Zip gold	
for the pump	the provisions of sections 620.1051 and 62 ose of changing its registered office or regis familiar with, and accept the obligations of a	tered agent, or both, in the State of Florid	d limited partne la. Such chang	rship organized or registered under the laws of the was authorized by its general partner(s). I herei	e State of F lor id by accept th e a p	a, submits this statement pointment of registered	
SIGNATURE (Regist	ered Agent Accepting Appointment)						
A GENER	RAL PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED AN	.IMITED D ACTIV	PARTNERSHIP OR OTHE /E WITH THIS OFFICE.	R BUSI	NESS ENTITY	
11. Name(s)	of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo	l Partner x Numbers)	11b. City, State & Zip Code	11c.	Registration/ Document Number	
ARNOLD, O	NLEY E	2761 N.E. 6TH STREET		POMPANO BEACH FL 3306			
ARNOLD, MA	ARNOLD, MAY 2761 N.E. 6TH STREET		POMPANO BEACH FL 3306				
				90002 -09/11 *****\$	6376 /93 0 1 3 9 .00	5799 085021 ****535.00	

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 kiability 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 Complete

LEY E. MRNOLD

DATE // 0 / 245 2 umber 954-94/- 245 2

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