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

1. Name of Limited Partnership

KRH HOLDINGS, LTD.

A9700001261

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC -3 PM 12: 04

1214



Malling Address	Principal Office Address 8424 N.W. 31 COURT		3. Date Formed or R	legistered 5a. Cap	5a. Capital Contributions as Shown on record.	
P.O. BOX 190463			06/09/1997			
FORT LAUDERDALE FL 33319-0463	SUNRISE FL 33351			\$5,000.00		
				5b. Ame	ount of Capital tributions in FLORIDA	
2. Malling Address	2a. Principal Office Address		4. State or Country o	(Formation 10 0	ate:	
			FL	# 3	,000.00	
Sulte, Apt. #, etc.	. #, etc. Suite, Apt. #, etc.		6. FEI Number		Applied For	
City & State	City & State			9744	Not Applicable	
Z ip Country	7in	Zip Country		is Desired	\$8.75 Additional Fee Required	
E.D. Country				ble to: Dept. of State (See re	State (See reverse side for fee Informat	
O Nome and Address of	Numeral Bankstoned Appart	1	10 If abancad	now Registered Apont/Office		
9. Name and Address of Current Registered Agent HOBBS, KENNIE JR.		10. If changed, now Registered Agent/Office Name				
		Street Address (P.O. Box Number Is Not Acceptable)				
5721 N.W. 14TH ST.		Suite, Apt. #, etc.				
LAUDERHILL FL 33313						
		City			Zip Code	
A GENERAL PARTNER TH	HAT IS A CORPORATION, NUST BE REGISTERED AN				NESS ENTITY	
Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office E	I Francisco	11b. City, State & Zip C		Registration/ Document Number	
HOBBS, KENNIE JR.	5721 N.W. 14TH ST.		LAUDERHILL FL 3331	3		
	5704 NW 44TH OT					
HOBBS, RUCHELLE R	5721 N.W. 14TH ST.		LAUDERHILL FL 3331	3		
		ı	gara ma	oozaba:	7a.ee	
			***** **** ***** ***** ***** ***** *****	-12/10/970	1110008	
				****156,25	****156.25	
Note: General partners MAY	MOT he changed on this for	m· an am	andment must be file	ed to change a	eneral nartner	
 I do hereby certify that the information supplied Corporations from any liability of non-compilar this annual report is true and accurate and that empowered to execute this report as required 	d with this filing is voluntarily furnished and does r ace with Section 119 07(3)(k) in the event that the at my signature shall have the same logal effects a by chapter 620, Floride Statutes.	not qualify for the information supp	e exemption stated in Section 119.07 blied is deemed exempt from public oath. I further certify that I am a Ger	7(3)(k), Florida Statutes. I re access. I further certify that heral Partner of the limited p	ease the Division of the information indicated c artnership, receiver or trust	
SIGNATURE LUM				DATE 12/1 Number 954	197	
Typed or Printed Name of Goneral Partner Signing Fo	m. Kennie HoßBS,	J1.	. Daytime Telephone	Number 954-	749-831	