

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

LIMITED PARTNERSHIP ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

98 JAN -5 AM 10:55

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<b>1.</b> Name of Limited Partnership  1725 MKL LIMITED PARTNERSHIP	<b>1a.</b> DOCUMENT # <b>A97000001731</b>
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<b>2.</b> Mailing Address 1725 W. Dr. Martin Luther King Jr., Blvd. Suite, Apt. #, etc.	<b>2a.</b> Principal Office Address 5609 N. ARMENIA AVE TAMPA FL 33603	<b>3.</b> Date Formed or Registered 07/30/1997
City & State Tampa, FL	City & State Tampa, FL	<b>3a.</b> Date of Last Report
Zip 33607	Country Hillsborough	<b>4.</b> State or Country of Formation FL
<b>5a.</b> Capital Contributions as Shown on record \$2,000.00		<b>5b.</b> Amount of Capital Contributions in FLORIDA to date:
<b>6.</b> FET Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>7.</b> Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required
<b>8.</b> Make check payable to: Dept. of State (See reverse side for fee information)		

<b>9.</b> Name and Address of Current Registered Agent  FINANCIAL ANALYSIS AND REPORTS, INC. % BRAD A GALLO 5609 N ARMENIA AVE TAMPA FL 33603
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<b>10.</b> If changed, new Registered Agent/Office  Name Street Address (P.O. Box Number Is Not Acceptable) 1725 W. Dr. M.L. King Jr. Blvd. Suite, Apt. #, etc. Tampa City FL Zip Code 33607
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**10a.** Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment) \_\_\_\_\_ DATE \_\_\_\_\_

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
FINANCIAL ANALYSIS AND REPOR	5609 N. ARMENIA AVE	TAMPA FL 33603	S45452
200002405412--? -01/20/98--01128--002 ****156.25 ****156.25			

**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 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 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 <i>Brad Gallo, Pres</i> Typed or Printed Name of General Partner Signing Form FINANCIAL ANALYSIS & REPORTS, INC. GENERAL PARTNER	DATE 12/31/97 Daytime Telephone Number 813-870-0811
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CR2E003 (6/97)