er en	~ ~ ~ ~			
A PLICATION OR FEINSTATE I NT FOR LIMITED PARTNERSHIP	FLOF DATE PART BARTER B. Storetary IVISION OF SE	NEN OF STAT TOTAL AM OF STATIONS	ANE LA COM	OS ORATIONS
DOCUMENT # # 9700000	02065		98 MAY 12 AI	1 8: 53
GARTNER FAMILY	IMITED PART	NERSHIP	DO NOT WRIT	E IN THIS SPACE
2. Mailing Address 1524 SW 5 Sy		4. Date Formed or Registered To Do Business in Florida 23 SEPT. 1997		
15245W5 57. Suite, Apl. #, etc.	1524 SW 5 S77 Suite, Apt #, etc.		5. FEI Number	Applied For
City & State	City & State			Not Applicable
FT. LAUDER DALE, FL.	FT LAUDERDALE, FL.		6. CERTIFICATE OF STATUS DESIR	SB.75 Additional Fee required for a Certificate of Status
33312 USA	333/2		7. State or Country of Formation	FL.
8a. Capital Contributions as Shown on Record 652, 000. 8b. Amount of Capital Contributions in FLORIDA to date 9652,000.	FEES:1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for <u>each year due</u> this office. 2.) Supplemental Fee(s): \$587.5 for <u>each year due</u> this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for <u>each year report form is delinquent.</u> Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
			10. If changed, new registered	agent/office
SABRA, RICHARD B. E. YO ATMINSON, DINER, STON 1946 TYLER STI	SQ. VE+MANKUTA, P.A.		ox Number is Not Acceptable)	
HOLLYWOOD, FL. 33020		Suite, Apt. #, etc. City Zin Code; a 47 14		
10a. Pursuant to the provisions of sections 620 1051 and 620 for the purpose of changing its registered office or registagent. I am familiar with, and accept the obligations of the section of the control of the contr	0.192, Florida Statutes, the above-nameo stered agont, or both, in the State of Floric	Fimited partnership organ da. Such change was auth	zed or registered under the laws of the lorized by its general partner(s). I hereby	State of Fiorida, submits this statement y accept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointment)	4 000000 ATION 11		DATE	
A GENERAL PARTNER THAT IS MUST E	BE REGISTERED AND			BUSINESS ENTITY
11. Names of Goneral Partner(s)	Address of Each General Par (Do NOT Use Post Office Box Nu	tner	City, State and Zip Code	11a. Registration Document Number
GARTHER, STEWART I.	1524 SW 5 ST.	F7.44	UDERDALE, FL. 33312 WETTE, L. 60091	
GARTNER, STEWART I.	604 LARAMIE	WILL	WETTE, K GADEI	(FAC)
				229197 801013006 .25 ***1026.25
Note: General partners MAY NOT be	changed on this form	an amendmen	t must be filed to at a	

DATE 29 Copil 1998
Telephone Number 954-728-8936

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. Hurther certify that the information indicated on this innual report is true and accurate and that my signalure 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 embarred to execute this port as required by chapter 62 priorida Statutes.

Typed or Printed Name of General Partner Signing Form BERNARD DAYID GARTNER