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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 30 PM 3: 34

					V' J4		
1. Name of Limited Partnership	1a. DOCUMENT # A97000002572						
A & K OF ORLANDO LIMITED PARTNERSHIP							
				OP1/14			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a, Capital	Contributions as on record.	
9753 SOUTH ORANGE BLOSSOM TRAIL	9753 SOUTH ORANGE BLOSSOM TRAIL ORLANDO FL 32837			11/19/1997	1 .	\$5,000.00	
ORLANDO FL 32837				3a. Date of Last Report			
				01/02/1998	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation			
c/o 106 South Lake Avenue	c/o 106 South Lake Avenue			FL	2,0	000	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 59-347	76/2	Applied For Not Applicable	
City & State Orlando, Florida	Orlando, Florida			7. Certificate of Status Desired	52₺	\$8.75 Additional	
Zip 32801 Country	Zip 32801 Country			Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
WACHS, JEFFREY S ESQ.			Ronald W. Black, Attorney				
1177 S.E. 3RD AVENUE			Street Address (P.O. Box Number Is Not Acceptable) 106 South Lake Avenue				
FORT LAUDERDALE FL 33316							
City Orlando			ndo	<u> </u>	FL	^{Zig} £851	
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. 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. 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. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida.							
against an identification of the congestion of the					12/29/	/ag	
SIGNATURE (Registered Agent Accepting Appointment)	(e	_		Ronald W. Blackate			
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 (Do NOT Use Post Office Box	Partner (Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
ASHDJI, FOUAD S	106 S. Lake Avenue 9753 SOUTH ORANGE BLO		Or lar				
KEOTAHLIAN, MICHAEL G	106 S. Lake Avenue O		Orlar GRL	ndo, FL. 32801 ANDO FL-3283 7			
				400002 -01/15	445	945 108021	

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 the report as required by chapter 620, Florida Statutes.

SIGNATURE_

Typed or Printed Name of General Partner Signing Form

Fouad S. Ashdji

DATE 12/29/98

Daytime Telephone Number 4/27-578-6088

****150.00 ****150.00

CR2E003 (8/98