

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 OCT 23 AM 9:49

10/24

1. Name of Limited Partnership

1a. DOCUMENT #
A98000000490

SEIN FAMILY LIMITED PARTNERSHIP, LTD.



Mailing Address

36342 US HIGHWAY 19 NORTH
PALM HARBOR FL 34684-9834

Principal Office Address

36342 US HIGHWAY 19 NORTH
PALM HARBOR FL 34684-9834

3. Date Formed or Registered

02/20/1998

3a. Date of Last Report

5a. Capital Contributions as
Shown on record.

\$300,000.00

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$50,000.00

4. State or Country of Formation

FL

6. FEI Number

59-3496116

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

GOTTLIEB & GOTTLIEB, P.A.
2475 ENTERPRISES ROAD, SUITE 100
CLEARWATER FL 33763

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

600002674796-8

Suite, Apt. #, etc.

-10/28/98-01077-024

City

****438.75

****438.75

FL

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)

RAMON SEIN, FRANCISCO

C. LLOMPART SEIN, NAIDA

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

101 Tazmin St.
P.O. BOX 21346
Urb. San Francisco
P.O. BOX 21346
101 Tazmin St.
Urb. San Francisco

11b. City, State & Zip Code

SAN JUAN, PUERTO RICO
00927
SAN JUAN, PUERTO RICO
00927

11c. Registration/
Document Number

600002674796-8

-10/28/98-01077-024

****438.75

****438.75

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

Francisco R. Sein

DATE

10/20/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)