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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999

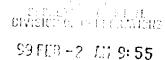


FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #



1. Name of Limited Partnership		A9800000636				
SEMBLER EDP PARTNE	ERSHIP #10, LTD.					
Mailing Address C/O THE SEMBLER COMPANY P.O. BOX 41847 ST. PETERSBURG FL 33743-1847	Principal Office Address 5858 CENTRAL AVENUE ST. PETERSBURG FL 33707	5858 CENTRAL AVENUE		5a. Capital Contributions as Shown on record. \$100.00 5b. Amount of Capital Contributions in FLORIDA to date: \$231,145		
2. Melling Address	2a. Principal Office Address					
Suite, Apt. #, etc. City & State				6. FEI Number 59-3512511 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)		
Zip Country	Zsp					
9. Name and Addre	ss of Current Registered Agent		10. If changed, new Registerer	d Agent/Office		
SHER, CRAIG H 5858 CENTRAL AVENUE ST. PETERSBURG FL 33707		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc				
for the purpose of changing its registe	t 620.1051 and 620.192, Florida Statutes, the above- ered office or registered agent, or both, in the State of the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment)			DATE			
A GENERAL PARTNER	R THAT IS A CORPORATION MUST BE REGISTERED	N, LIMITED PA AND ACTIVE	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY		

Address of Each General Partner Registration/ 11. 11c. Name(s) of General Partner(s) 11b. City, State & Zip Code (Do NOT Use Post Office Box Numbers) Document Number SEMBLER RETAIL, INC. **5858 CENTRAL AVENUE** ST. PETERSBURG FL 33707 P96000003312 000002767016--9 -02/08/99--01018--012 ****53\$.00 ****53\$.00

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-pompliance 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 accurage any that my singleture shall have the same legal effects as it made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by observe 620, Florida Statutes.

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Typed or Printed Name of General Partner Signing Form

Cray Sher, President

DATE 12/29/98

Daytime Telephone Number 727-384-6000