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

LIMITED PARTNERSHIP FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 98 DEC 30 AM 10: 05 DOCUMENT # 1. Name of Limited Partnership SECRETARY OF STATE TALLAHASSEE, FLORIDA Ä98000001197 MENAKER INVESTMENTS I, LTD. 3. Date Formed or Registered Capital Contributions as Shown on record. Mailing Address Principal Office Address 05/08/1998 1502 E. BUENA VISTA DRIVE. #B1 P.O. BOX 22189 \$320,000.00 LAKE BUENA VISTA FL 32830 LAKE BUENA VISTA FL 32830 3a. Date of Last Report 5b. Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address -0-FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number 🖵 Applied For Not Applicable 59-35/2,909 City & State City & State 7. Certificate of Status Desired X \$8.75 Additional Fee Required Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent Name MENAKER, MITCHELL G Street Address (P.O. Box Number Is Not Acceptable) 1502 E. BUENA VISTA DRIVE, #B1 LAKE BUENA VISTA FL 32830 Suite, Apt. #, etc. Zip Code 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. 11c. Name(s) of General Partner(s) 11b. City, State & Zip Code Document Number 1502 E. BUENA VISTA D LAKE BUENA VISTA FL 3 P98000043091 MENAKER INVESTMENTS I, INC. \*\*\*\*535.00 \*\*\*\*535.00

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-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 stall 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 trusted
	empowered to execute this percet as required by chapter 220, Florida Statutes.

DATE 12-28-98

Daytime Telephone Number 407 874 - 8244 Typed or Printed Name of General Partner Signing Form