## LIMITED PARTNERSHIP ANNUAL REPORT 1998

JAPPAH INVESTMENTS LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9800000 2777 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 22 PM 12: 23

			ļ				
Mailing Address Principal Office Address  9000 S.W. 152nd Street, Suite 106 Miami, Florida 33157			· <u>-</u> -	3. Date Formed or Registered			
Filam, 11017da 35257		چ چ		N/A  4. State or Country of Formation	5b. Amo Cont to da	unt of Capital ributions in FLORIDA	
2. Mailing Address 9000 S.W. 152nd Street	2a. Principal Office Address 9000 S.W. 152nd Street			Florida	\$1,020	\$1,020,000	
Suite, Apr. #, etc. Suite 106 City & State	Suite, Apt. #, etc. Suite 106 City & State			6. FEI Number 65-08815	75	Applied For Not Applicable	
Miami, Florida Zip Country	Miami, Florida Zip Country			7. Certificate of Status Desired		\$8.75 Additional Fee Required	
33157 UŞA	33157 USA			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					
Donald E. Kubit, Esq. 100 S.E. 2nd Street, 17th Floor Miami, Florida 33131		Name					
		Street Address (P.O. Box Number Is Not Acceptable)					
		Suite, Apt. #, etc. 300002739233				2336- 1027005	
City			*****526 <b>.25</b> _  *****526.25 +				
tor the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS  MUST	f section 620,192, Florida Statutes	IMITED	PART	NERSHIP OR OTH	TE		
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
JAPPAH MANAGEMENT L.L.C.	9000 S.W. 152nd Street		Miam	i, Florida 33157	H98 <del>00</del> 1	1011_NO. 1023449 1000003222	
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 Corporations from any liability of non-compliance with S this annual report is true and accurate and that my sign empowered to execute this report as required by chapt	ection 119 07(3)(k) in the event that the in ature shall have the same legal effects as	formation suppl	ied is deer	ned exempt from public access. I fo er certify that I am a General Partne	urther certify that er of the limited p	the information indicated on artnership, receiver or trustee	
SIGNATURE By:	Vice President			DATE _	Dec /9	1998	
Typed or Printed Name of General Partner Signing Form NO	rman Buhrmaster			Davtime Telephone Number	(305) 278	-8400	