## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

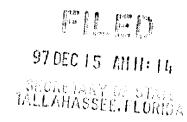
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **B9300000066** 

\_\_B930000

NORTHEAST PLAZA ASSOCIATES, LTD.





					9/12/17	
Malling Address		Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
1001 W. CYPRESS CREEK RD. 1001 W. CYPRESS CREEK RD. SUITE 320		RD.	02/18/1993 3a. Date of Last Report	\$855,000.00		
		*****				
FT. LAUDERDALE FL 33	FL 33309 ress Country  9. Name and Address of Co	FT. LAUDERDALE FL 33309		12/24/1996	5b. Amount of Capital Contributions in FLORIDA	
				4. State or Country of Formation	to date:	
2. Mailing Address		28. Principal Office Address		ОН		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. FE! Number	Applied For	
City & State		City & State		25-1370093	☐ Not Applicable	
				7. Certificate of Status Desirod	\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	8. Make check payable to: Dept. of	State (See reverse side for fee information)	
9	Name and Address of C	urrent Registered Agent		10. If changed, new Registers	ed Agent/Office	
				Namo		
NOBIL, JAMES H 1001 W. CYPRESS CREEK RD.			Street Address (P.O. Box Number Is Not Acceptable)			
SUITE 320			Suite, Apt. #, etc.			
FT. LAUDERDALE FL 33309			Cily	City FL Zip Code		
10e Parsuant to the r	provisions of sections 620 10	51 and 620 192 Florida Statutes, the short	re-named limited partnersh	nin programmed or registered under the laws of t	the State of Florida, submitte this statement	

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). Thereby 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.

MOST DE REGISTERED AND ACTIVE WITH THIS OFFICE.						
11. Name(s) of General Partner(s)	Address of Each Goneral Partner (Do NO1 Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number			
NOBIL, JAMES H	1001 W CYPRESS CREEK	FT. LAUDERDALE FL 333				
NOBIL, LYNN	1001 W. CYPRESS CREEK	FT. LAUDERDALE FL 333				
NOVICK, IVAN J	445 FORT PITT BOULEVA	PITTSBURGH PA 15219				
NOVICK, MARY B	445 FORT PITT BOULEVA	PITTSBURGH PA 15219				
		400002 -12/26	3836 <b>74 1</b> /97-01080-024			
f .		*************************************	41].25 ****541.25			

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. Frelease 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 any that my signature shall have the same logal effects as if 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 chapter 620, Florida Statutes.

SIGNATURE \_

Jan X.

James H. Nobil

DATE 12-19/97

Daytime Telephone Number (954) 772-5320

CR25003 (6/97)