

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 OCT 16 AM 10:17

1. Name of Limited Partnership

1a. DOCUMENT #
B96000000039

TAVERNEER PARTNERS, LIMITED PARTNERSHIP



Mailing Address
**550 MAMARONECK AVE.
STE. 209
HARRISON NY 10528**

Principal Office Address
**550 MAMARONECK AVE.
STE. 209
HARRISON NY 10528**

3. Date Formed or Registered
01/26/1996

5a. Capital Contributions as Shown on record
\$210.00

3a. Date of Last Report

5b. Amount of Capital Contributions in FL ORIDA to date
\$210.-

4. State or Country of Formation
NY

2. Mailing Address

2a. Principal Office Address

6. FEI Number
65-0627853 Applied For
 Not Applicable

Suite, Apt #, etc

Suite, Apt #, etc.

7. Certificate of Status Desired **\$8.75 Additional
Fec Required**

City & State

City & State

8. Make check payable to Dept. of State (See reverse side for fee information)
\$191.25

Zip Country

Zip Country

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

**KENNEDY, PAT
251 ROYAL PALM WAY
PALM BEACH FL 33480**

Name

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

Suite, Apt #, etc

City

FL 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)

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)

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

11b. City, State & Zip Code

11c. Registration/ Document Number

TAVERNEER GROUP, INC.

550 MAMARONECK AVE.,

HARRISON NY 10528

P94000086856

**200001978162--2
-10/17/96--01011--018
****191.25 ****191.25**

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. 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 effect 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

DATE

[Handwritten Signature]

9/10/96

Typed or Printed Name of General Partner Signing Form

LARRY ROFFEATY, PRESIDENT, TAVERNEER GROUP, INC

CR2E003 (6/96)