$\tilde{}$ File on or before december 31, 1996 or partnership will be subject to revocation and \$500 penalty fee

LIMITED PARTNERSHIP **ANNUAL REPORT** 1007



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS סת נוחון בו מא ה

C/O CORPORATION TRUST CENTER 1209 ORANGE STREET WILLIAMSTON DE 19901 2. Mailing Address 28. Principal Office Address 29. Mailing Address 29. Mailing Address 20. Suite, Apt. #, etc. 20. Suite, Apt. #, etc. 20. Country 20. Country 20. Country 20. Country 20. Country 20. Mare and Address of Current Registered Agent 20. Mare and Address of Current Registered Agent 20. Mare and Address of Current Registered Agent 20. South PNE ISLAND ROAD PLANTATION FL 33324 20. South PNE ISLAND ROAD PLANTATION FL 33	•	L	/ENT# 0160	i sādisās (āsā sālis allis ādis) ādis	
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28. Mailing Address 28. Principal Office Address Suite, Apt. 9, etc. City & State	:	-			5b. Amount of Capital
City & State Country Country Country R. Mame and Address of Current Registered Agent C. T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Country Name 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Surface, Agri #, etc. City FL Zep Code 10a. Pursuant to the provisions of sections \$20.1051 and \$20.102. Portical Statutes, the above-nemed limited partnership organized or registered under the laws of the State of Piorida, submits this statement for the purpose of changing its registered apont, or both, in the State of Florida. Such change was authorized by the persual partner(s). Thereby accept the appointment of registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(c) of General Partner(s) 11a. (p.) Address of Section Sections (Section Sections) 11a. (p.) Address of Section Sections (Section Sections) 11b. City, State & Zep Code 11c. Registration PARTMAZ MANAGEMENT COMPANY 621 SNIVELY AVE. WINTER HAVEN FL 33880 F94000004881	2. Mailing Address	2a. Principal Office Address			
City & State To Country Zip Country Zip Country Zip Country Zip Country Zip Country R. Make check payable to Dept of State (See reverse side for fee information of the provisions of sections 670 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Fordia, submits this statem for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. Such change was authorized by its general partnership in the statem of the purpose of changing at registered agent, or both, in the State of Florida. Such change was authorized by its general partnership in the statem of Pordia, submits this statem for the purpose of changing at registered agent, or both, in the State of Florida. Such change was authorized by its general partnership in the partnership accept the appointment of register generic in the 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 ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (Addispase of Each (General Partners) ARR-MAZ MANAGEMENT COMPANY 621 SNIVELY AVE. WINTER HAVEN FL 33880 F94000004881					
8. Make orbeck payable to Dept. of State (See reverse side for fee information of the provisions of sections \$20 1051 and \$20 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Fordia, submits this statement of the purpose of changing its registered apent, or both, in the State of Florida Such change was authorized by its general partner(s). Therefore, appendix appendix appendix and accept the obligations of section \$20 192. Florida Statutes. **SIGNATURE** (Registered Agent Accepting Appointment)** **A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED ARRAMAZ MANAGEMENT COMPANY **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **11. Name(s) of General Partner(s)** **ARR-MAZ MANAGEMENT COMPANY **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **This is a statement of the provisions of section \$20 192. Florida Statutes.** **BIONATURE** (Registered Agent Accepting Appointment)** **DATE** **A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AGENCY WITH THIS OFFICE.** **11. Name(s) of General Partner(s)** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACTIVE WITH THIS OFFICE.** **ARR-MAZ MANAGEMENT COMPANY** **BERGISTERED AND ACT					\$8.75 Additional
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Sured Address (P.O. Box Number is Not Accessable)	ZIP Country	Zip	Zip Country		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Street Address (P.O. Box Number is Not Accessable) Street Address (P.O. Box Number is Not Accessable) Suito, 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 stateme for the purpose of changing is registered aligner, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registere agent. I am familiar with, and accept the objection 620 192, Florida Statutes. BIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (co NOT the Post Office Box Numbers) 11b. City, State & Zip Code 11c. Decument Number Decument Numbe	9. Name and Address of Curren	nt Registered Agent		10. If changed, new Registered	Agent/Office
PLANTATION FL 33324 Sulto, Apt. #, etc. City FL Zip Code To the purpose of changing its registered office or registered spent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of register 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 ENTITED BY THE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (po NOT Use Post Office Box Numbers) ARR-MAZ MANAGEMENT COMPANY 621 SNIVELY AVE. Sulto, Apt. #, etc. City FL Zip Code FL Zip Code The State of Forida, submits this statement or registered under the laws of the State of Forida, submits this statement or registered under the laws of the State of Forida, submits this statement or the State of Forida. Such change was authorized by its general partner(s) i hereby accept the appointment of register agent. I have been a submit of the State of Forida. Such change was authorized by its general partner(s). I hereby accept the appointment of register agent. I have been a submit of the State of Forida. Such change was authorized by its general partner(s). I hereby accept the appointment of register agent. I have been agent			Name		
Total Partners Suite, Apr. #, etc.			Street Address (P.O. Box Number is Not Acceptable)		
PL 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 stateme for the purpose of changing its 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 (Registated Agent Accepting Appointment) 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(e) 11a. (Do NOT Use Post Office Box Numbers) ARR-MAZ MANAGEMENT COMPANY 621 SNIVELY AVE. WINTER HAVEN FL 33880 F94000004681 *******191.25	PLANTATION FL 33324	•	Suite, Apt. #, etc	#, etc.	
10a. Pursuant to the provisions of sections 620 1951 and 620 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Forida, submits this statement for the purpose of changing its 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. DATE			City		FL Zip Code
ARR-MAZ MANAGEMENT COMPANY AR	for the purpose of changing its registered office of agent. I am familiar with, and accept the obligation	registered agent, or both, in the State of F		was authorized by its general partner(s). I here	by accept the appointment of registers
11. Name(s) of General Partner(s) ARR-MAZ MANAGEMENT COMPANY 621 SNIVELY AVE. WINTER HAVEN FL 33880 F94000004681		IS A CORPORATION, BT BE REGISTERED A	LIMITED PA		
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****191.25 *****191.25	ARR-MAZ MANAGEMENT COMPANY	621 SNIVELY AVE.		WINTER HAVEN FL 33880	F94000004681
Note: General partners MAV NOT be changed on this form: an emendment must be filed to change a general partner				9000021 -11/13/ ****19	0028594 9601105006 91.25 ****191.25
140.00 feorial barriers MP 1 140 t pé cualifica ou ruis foruit au autonament mast pe més té cualific a Acheral barrier	Note: General partners MAY NO	T be changed on this for	rm; an amen	dment must be filed to cha	inge a general partner

this annual report is true and acquirate and that my sign ave the same legal effects 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 i

SIGNATURE.