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

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1990	DIVISION OF C	ORPORATION	NS	98 JAN 12 PM 1	2.20		
1. Name of Limited Partnership	1a. DOCUMENT # B9600000324			SFORT LARY OF STATE OF THE TRANSPORTED TO THE TRANSPORTED TO THE TRANSPORTED T			
THREE-G ORLANDO PROPERT	TIES. LTD.						
			į	ia.		2/1/01	
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Shown 6	Contributions as	
1400 BROOKPARK RD.	1400 BROOKPARK RD.			08/13/1996 \$3,000.00		.000.00	
CLEVELAND OH 44109	CLEVELAND OH 44109			Ja. Date of Last Report			
				4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address 7400 NW 79th Ave.	2a. Principal Office Address			OH			
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5 / 897 Applied For		
City & State	City & State			APPLIED FOR		Not Applicable	
Zip Country	Zip Country			7. Certificate of Status Desired		\$8.75 Additional Fee Required	
33166	33166	3311do		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				
UDELSON EQUIPMENT COMPANY		Name Street Address (P.O. Box Number Is Not Acceptable)					
7400 NW 79TH AVENUE MIAMI FL 33166					8000024095285		
MIAMI FL 33100		Suite, Apt. #, etc.		-01/22/9801126002 ****158.25			
			City FL Zip Code				
10a, Pursuant to the provisions of sections 620 1051 and for the purpose of changing its registered office or ragent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	egistered agent, or both, in the State of Fic of section 620.192, Florida Statutes.	rida. Such char	nge was auti	horized by its general partner(s). I here	eby accept the ap	pointment of registered	
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 (Do NOT Use Post Office Br	al Partner ox Numbers) ·	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
THREE-G ORLANDO REALTY CO.,	PREALTY CO., 1460 BROOKPARK RD.		C LE	OLEVELAND OH 44109 Micimi, Fl 33166		M9600000154	
			ω_{κ}				
		İ					
Note: General partners MAY NOT	be changed on this form	n: an ame	endmer	nt must be filed to cha	nge a ger	eral 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), Fiorida 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 by my infiniture shall 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 Inature shall have the same legal effects as il made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

SIGNATURE