

**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 NOV 30 AM 10: 37

1. Name of Limited Partnership  <b>2825 WINKLER LIMITED PARTNERSHIP</b>	1a. DOCUMENT # <b>B97000000253</b>
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*FD 12/3*

Mailing Address 751 PARK OF COMMERCE DR., STE. 128 BOCA RATON FL 33487	Principal Office Address 751 PARK OF COMMERCE DR., STE. 128 BOCA RATON FL 33487	3. Date Formed or Registered <b>05/29/1997</b>	5a. Capital Contributions as Shown on record. <b>\$99.00</b>
		3a. Date of Last Report <b>12/31/1997</b>	5b. Amount of Capital Contributions in FLORIDA to date: <b>0</b>
		4. State or Country of Formation <b>MD</b>	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	6. FEI Number <b>52-2036061</b> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM</b> 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	10. If changed, new Registered Agent/Office Name: <b>Florida-Lawdock, Inc.</b> Street Address (P.O. Box Number is Not Acceptable): <b>222 Lakeview Avenue</b> Suite, Apt. #, etc.: <b>4th Floor</b> City: <b>West Palm Beach</b> FL Zip Code: <b>33402-3188</b>
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**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) *Martin Pechter* U.P. DATE 11/17/98

**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
2825 CORP.	751 PARK OF COMMERCE	BOCA RATON FL 33487	F97000002806
300002707309---5 -12/03/98--01031--021 ***141.25 ***141.25			

**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 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 report as required by chapter 620, Florida Statutes.

SIGNATURE *Martin Pechter* DATE 11-19-98  
 Martin Pechter (561) 982-7770  
 Typed or Printed Name of General Partner Signing Form Daytime Telephone Number

CR2E003 (8/98)