

**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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC 12 PM 1:03

mtu  
12/15

1. Name of Limited Partnership

1a. DOCUMENT #  
**B97000000347**

**THE MONTOYA FAMILY PARTNERSHIP, L.P.**



Mailing Address

3576 FAIR OAKS WAY  
LONG BOAT KEY FL 34228-4164

Principal Office Address

NORTH SHORE TOWERS, 270-32B GRAND CENTRAL  
PARKWAY  
FLORAL PARK NY 11005

3. Date Formed or Registered

07/11/1997

5a. Capital Contributions as  
Shown on record.

\$0.00

3a. Date of Last Report

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

0.00

4. State or Country of Formation

NY

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

22-3484103

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired



\$8.75 Additional  
Fee Required

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

9. Name and Address of Current Registered Agent

MONTOYA, ALBERTO  
3576 FAIR OAKS WAY  
LONG BOAT KEY FL 34228-4164

10. If changed, now Registered Agent/Office

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

MONTOYA, ALBERTO

3576 FAIR OAKS WAY

LONG BOAT KEY FL 3422

MONTOYA, JOAN

3576 FAIR OAKS WAY

LONG BOAT KEY FL 3422

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-12/17/97--01109--006  
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**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

*Alberto Montoya*

DATE

Dec 10/1997

Typed or Printed Name of General Partner Signing Form

Alberto Montoya

Daytime Telephone Number

CR2E003 (6/97)