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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Sapira B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A24221**

FILE()
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 FEB - 1 AM 10: 51

ROYAL PLAZA NORTH, LIMITED PARTNERSHIP	
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Melling Address 675 ROYAL PALM BEACH BL ROYAL PALM BEACH FL 334		Principal Office Address 675 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411			3. Date Formed or Registered 03/06/1987 38. Date of Last Report	5a. Capital Contributions as Shown on record. \$300,000.00		
					09/25/1997 4. State or Country of Formation	5b. Amour Contril to date	nt of Capital outions in FLORIDA	
2. Mailing Address		2a. Principal Office Address			FL			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. FEI Number 59-2597416	Applied For Not Applicable		
City & State		City & State			7. Certificate of Status Desired		· · · · · · · · · · · · · · · · · · ·	
Zip (Country	Zip Country				\$8.75 Additional Fee Required of State (See reverse side for fee information)		
9, Nar	me and Address of Current Reg	istered Agent			10. If changed, new Registered Agent/Office			
IONES PORERT D		ress (P.O. Box Number Is Not Acceptable) 027675800						
10a. Pursuant to the provisions of sections 620,1051 and 620,1051 and 620,1052, 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) A GENERAL PARTNER THAT IS A CORPORATION LITTLE ACCEPTATION LITTLE ACCEPTATI			IMITED	MITED PARTNERSHIP OR OTHER BUSINESS ENTITY				
	MUST E	BE REGISTERED AN	D ACTIV	E WITH	THIS OFFICE.			
11. Neme(s) of General	Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	Pariner x Numbers)	-14b.	City, State & Zip Code	11c.	Registration/ Document Number	
SANTAMARIA, JESS	R.	155 GALIANO ST.	1	ROYA	L PALM BEACH FL			
SANGËR, WALLACE	D.	11333 ACME RD.		WEST	PALM BEACH FL	\\		
					000002° -02/08 *****	7675 78301 38.75	5800 (085008 *****88.75	
-							32.399	
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), Floride Statutes. I release the Division of

empowered to execute this report as required by chapter 620. Florida Statutes

SIGNATURE X

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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee