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

1. Name of Limited Partnership

DOCUMENT # A94000001290

97 DEC 30 PM 3: 27



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IE AMBASSADOR OF L,	LTD.				
Nine Addron	Dispersed Office Address		3. Date Formed or Reg stored	5a. Capital Contributions as	
Malling Address Principal Office Address			09/23/1994	Shown on record.	
51 RAVENSWOOD ROAD . LAUDERDALE FL 33312		2851 RAVENSWOOD ROAD FT. LAUDERDALE FL 33312		\$1,500,000.00	
				5b. Amount of Capital	
			10/07/1996 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
Malling Address	2a. Principal Office Addre	2a. Principal Office Address		200	
ulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		<u></u>	
ity & State	City & State		65-0527131	Applied For Not Applicable	
	Ony & State	Sity & Gitale		\$8.75 Additional Fee Required	
p Country	Zip	Zip Country		Fee Required 8. Make check payable to: Dopt. of State (See reverse side for fee Informat	
9. Name and Address of Current Registered Agent DANIEL D. DIEFENBACH II		Name Street Address (P.O. Box Number Is Not Acceptable)			
					2851 RAVENSWOOD ROAD
FT. LAUDERDALE FL 33312		Suite, Apt #, etc.			
		City FL Zip Code			
	1051 and 620,192, Florida Statutes, the above filice or registered agent, or both, in the State filipations of section 620,192. Florida Statutes				
agent. I am familiar with, and accept the ob-	ionl)	N, LIMITED PA	DATE ARTNERSHIP OR OTHE		
agent. I am familier with, and accept the ob- BNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI- N	HAT IS A CORPORATIO	AND ACTIVE Y	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
agent. I am familier with, and accept the ob- 3NATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TH N Name(s) of General Partner(s)	HAT IS A CORPORATION STATE OF THE PROPERTION OF THE POST OF T	AND ACTIVE Y	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
agent. I am familier with, and accept the ob- BNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI- N	HAT IS A CORPORATION STATE OF THE PROPERTION OF THE POST OF T	AND ACTIVE V General Partnor lice Box Numbers) 11	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	

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 Convertions 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 fliating signature shall have the semi-based effects as if made under eath. 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, Elegist Structure.

SIGNATURE DATE PHOP 197

Typed or Printed Name of General Partner Signing Form DDD ASSOCIATES LIT TAC Daytime Telephone Number 305-944-4455