

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAR 29 AM 6:55 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Name of Limited Partnership GALI, LTD		1a. DOCUMENT # A98000001113		3. Date Formed or Registered 05/05/1998	
Mailing Address 1111 LINCOLN ROAD, SUITE #810 MIAMI BEACH FL 33139		Principal Office Address 1111 LINCOLN ROAD, SUITE #810 MIAMI BEACH FL 33139		5a. Capital Contributions as Shown on record \$70,000.00	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		3a. Date of Last Report 4. State or Country of Formation FL 6. FEI Number 7. Certificate of Status Desired 8. Make check payable to Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent WASSERMAN, MARTIN W 999 WASHINGTON AVENUE MIAMI BEACH FL 33139		10. If changed, new 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		
OPE, INC.	1111 LINCOLN ROAD, SU	MIAMI BEACH FL 33139	P98000040220		
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 Typed or Printed Name of General Partner Signing Form		DATE 3/22/99 305-534-8734			

CR2E003 (12/98)