## 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

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

99 JAN 15 AM 9:58

DELPAC ENTERPRISES, LTD.	

		A98000001	775					
DELPAC ENTE	RPRISES, LTD.							
Mailing Address		Principal Office Address			3. Date Formed or Registered	5a. Çapita	Contributions as on record.	
13104 SW 128TH STREET MIAMI FL 33186		13104 SW 128TH STREET MIAMI FL 33186		-3	07/27/1998 3a. Date of Last Report	\$5,000.00		
					4. State or Country of Formation	5b. Amour Contribute date	nt of Capital outions in FLORIDA	
2. Mailing Address		2a. Principal Office Address			FL		0,000,00	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0853657		Applied For	
City & State		City & State		7	7. Certificate of Status Desired Sa.75 Additional			
Zip .	Country	Zip	Country		3. Make check payable to; Dept. of St		Fee Required	
			<del></del>				LL 0 1587	
9	Name and Address of Current R	egistered Agent	10. If changed, new Registered Agent/Office					
MUDDIN METTE C			Name					
MURPHY, YVETTE G 1099 PONCE DE LEON BLVD.			Street Address (P.O. Box Number Is Not Acceptable)					
CORAL GABLES FL 33134			Sulte, Apt. #, etc.					
			City El Zi Pol					
for the purpose of c		20.192, Florida Statutes, the above-name istered agent, or both, in the State of Florid section 620,192, Florida Statutes.						
SIGNATURE (Registered Age					DATE		<u></u>	
A GENERAL	PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED AN	IMITED D ACTIV	PARTN E WITH	ERSHIP OR OTHER THIS OFFICE.	R BUSIN	IESS ENTITY	
11. Name(s) of Gene	ral Pariner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
GRAPHICA SERVICES, INC. 131		13104 SW 128TH STREE	13104 SW 128TH STREET		MIAMI FL 33186		L04979	
-			. <b>.</b>		****19 6000027	/9801 0.00 126: 9901	075017 ****150.00	
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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	f
	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 indic	cated 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 Preseden