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

1a. DOCUMENT # **A98000001110**

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SECRETARY OF STATE TALLAHASSEE FLORIDA

	A98000001110			IALLAIIAGGEE . E			
GOLDEN EQUITY, LTD.							
Mailing Address 777 17TH STREET, PENTHOUSE	Principal Office Address 777 17TH STREET. PENTHOUSE			3. Date Formed or Registered 05/05/1998	5a. Capital Contributions as Shown on record.		
MIAMI BEACH FL 33139	MIAMI BEACH FL 33139			3a. Date of Last Report 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 65- 683354	Applied For Not Applicable		
City & State	City & State			7. Certificate of Status Desired	sired \$8.75 Additional		
Zip Country	Zip Country			Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent				10. If changed, new Registered	Agent/Office		
MARCUS, ALAN J		Name	os (BO Boy	Number le Not Acceptable)			
20803 BISCAYNE BLVD., SUITE 301 NORTH MIAMI BEACH FL 33180		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
NONTH WILAWI DEACH FL 33 100		City		FL Zip Code			
for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS MUST	section 620.192, Florida Statutes.	IMITED I	PARTI	DATEDATE_	R BUSINESS ENTIT		
11. Name(s) of General Partner(s)	Address of Each General (Do NOT Use Post Office Box		11b.	City, State & Zip Code	11c. Registration/ Document Number	\perp	
SILVER EQUITY, LLC	777 17TH STREET, PENT	777 17TH STREET, PENT		I BEACH FL 33139	L98000000565 (8)8		
				4000027 -01/15/1 ****141	451448 9901129019 1.25 ****141.25	CR2EC	
•							
•							
Note: General partners MAY NOT b	e changed on this form	ı; an ame	ndmen	t must be filed to cha	inge a general partne	r.	
12. I do hereby certify that the information supplied with this is Corporations from any liability of non-compliance with Se this annual report is true and accurate and that my signal empowered to execute this report as required by chapter. SIGNIAT! IDE	ction 119.07(3)(k) in the event that the info ure shall have the same legal effects as if	ormation supplie f made under oat	ed is deemed oth. I further o	exempt from public access. I further ertify that I am a General Partner of the	certify that the information indicated	in itee	

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Typed or Printed Name of General Partner Signing Form

Alan J Marcu

Daytime Telephone Number 365-937. 1800