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

1. Name of Limited Partnership 1a. DOCUMENT # A9700001885 PACIFIC GROUP, LTD.			
PACIFIC GROUP, LTD.			
		######################################	
Mailing Address Principal Office Address 26 WESTWARD DR. 26 WESTWARD DR.	3. Date Formed or Registered 08/29/1997	5a. Capital Contributions as Shown on record	
MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166	3a. Date of Last Report 04/08/1998	\$10,000,000.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 2a. Principal Office Address	4. State or Country of Formation	to date: SAME	
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State	6. FEI Number 65-0778403	Applied For Not Applicable	
Zip Country Zip Country	7. Certificate of Status Desired	\$8.75 Additional 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		
ALWEISS, IRA	Street Address (P.O. Box Number Is Not Acceptable)		
MIAMI SPRINGS FL 33166 Suite, Apt #, etc City		FI 3044	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership or for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was a segent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.	authorized by its general partner(s). I hereb	State of Floride, submits his statement y accept the appointment of registered	
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PA MUST BE REGISTERED AND ACTIVE W	RTNERSHIP OR OTHE VITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s) 11a. Address of Each General Partner 11b. (Do NOT Use Post Office Box Numbers)		11c. Registration/	
26 WESTWARD DE I A	11941 SPRINGS P. HIALEAH FL 33010 ´ 3316.		
	HIALEAH FL 33010		
26 WESTWARD DR.	MIAMI SPRINGS, FI 33164	<u>Z</u>	
	:300002 -02/2° *****	7860938 1/9901090016 526.25 ****526.25	
Note: General partners MAY NOT be changed on this form; an amenda	nent must be filed to cha	inge 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	n stated in Section 119 07(3)(k), Florida Sta	tutes Trelease the Division of Corporation	

is true and accurate and that my signature shall have the same legal effects of if hade under oath. I further certify that I am a General Partner of the Innited partnership, receiver or trustee empowered to execute this report as equired by chapter 520, Florida Statutés.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Julesis IRA ALWEISS

DATE 2. 1695

Daytime Telephone Number 305-885-246/