

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
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 APR -5 PM 3:30

1. Name of Limited Partnership SUNDALE ASSOCIATES, LTD.		1a. DOCUMENT # A06164	
Mailing Address 9100 NORTH KENDALL DR MIAMI FL 33176	Principal Office Address 9100 NORTH KENDALL DR MIAMI FL 33176	3. Date Formed or Registered 12/16/1977	5a. Capital Contributions as Shown on record \$45,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report 11/05/1997	5b. Amount of Capital Contributions in FLORIDA to date 45,000
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation FL	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
City & State	City & State	6. FEI Number 59-1813297	
Zip	Country	7. Certificate of Status Desired <input type="checkbox"/> \$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 SCUTIERI, PHILIP JR. 9100 NORTH KENDALL DR. MIAMI FL 33176	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL
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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): *Philip Scutieri Jr.*

DATE: *1 April 1999*

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) SCUTIERI, PHILIP JR.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 9100 NORTH KENDALL DR	11b. City, State & Zip Code MIAMI FL 33176	11c. Registration/ Document Number 990002834999-2 -04/09/99-01043-013 ****403.75 ****403.75
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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 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

Philip Scutieri Jr.

DATE: *1 April 1999*

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/98)