


**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT <b>1999</b>		 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  98 NOV 30 AM 10:35	
1. Name of Limited Partnership  KYRIAKIS LIMITED		1a. DOCUMENT # <b>A10068</b>			
Mailing Address 849 BERKLEY COURT PALM HARBOR FL 34684		Principal Office Address 849 BERKLEY COURT PALM HARBOR FL 34684		3. Date Formed or Registered <b>02/16/1981</b>	
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 <b>10/20/1997</b>	
				4. State or Country of Formation <b>FL</b>	
				5a. Capital Contributions as Shown on record. <b>\$60,000.00</b>	
				5b. Amount of Capital Contributions in FLORIDA to date: <b>\$ 60,000.00</b>	
				6. FEI Number <b>58-1426897</b>	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				7. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				8. Make check payable to: Dept. of State (See reverse side for fee information)	



9. Name and Address of Current Registered Agent  KYRIAKIS, ALEXANDER 849 BERKLEY COURT PALM HARBOR FL 34684		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code <b>34684</b>	
---	--	--	--

**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)  KYRIAKIS & ASSOCIATES	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)  849 BERKLEY COURT	11b. City, State & Zip Code  PALM HARBOR FL	11c. Registration/ Document Number  F20112
300002713233--8 -12/15/98--01076--022 ***517.50 ***517.50			

CR2E003 (8/98)

**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 Alexander Kyriakis DATE Nov. 27, 1998  
 FOR KYRIAKIS & ASSOCIATES, INC.  
 Typed or Printed Name of General Partner Signing Form ALEXANDER KYRIAKIS Daytime Telephone Number (727) 784-6676