



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		<b>FILED</b> 98 DEC 31 PM 4:15 SECRETARY OF STATE TALLAHASSEE, FLORIDA 	
1. Name of Limited Partnership  <b>HENARD LIMITED</b>		1a. DOCUMENT # <b>A20292</b>			
Mailing Address  C/O RICHARD MONTALBANO 1108 PARRILLA DE AVILA TAMPA FL 33612		Principal Office Address  C/O RICHARD MONTALBANO 1108 PARRILLA DE AVILA TAMPA FL 33612		3. Date Formed or Registered <b>07/02/1985</b> 3a. Date of Last Report <b>12/16/1997</b> 4. State or Country of Formation <b>FL</b> 6. FEI Number <b>59-2601446</b> 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)	
2. Mailing Address  Suite, Apt. #, etc.  City & State  Zip Country		2a. Principal Office Address  Suite, Apt. #, etc.  City & State  Zip Country		5a. Capital Contributions as Shown on record. <b>\$20.00</b> 5b. Amount of Capital Contributions in FLORIDA to date: <b>20.00</b>	
9. Name and Address of Current Registered Agent  MONTALBANO, RICHARD C/O RICHARD MONTALBANO 1108 PARRILLA DE AVILA TAMPA FL 33612		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City <b>FL</b> Zip Code			
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 _____					
<b>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b>					
11. Name(s) of General Partner(s)  <b>RODSBANO, INC.</b>		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)  <b>1108 PARRILLA DE AVIL</b>		11b. City, State & Zip Code  <b>TAMPA FL 33613</b>	
11c. Registration/Document Number  <b>H60564</b>		300002744713--2 -01/15/99--01114--007 ****141.25 ****141.25			
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 <u><i>Richard Montalbano</i></u> DATE <u>Dec 22, 1998</u> Typed or Printed Name of General Partner Signing Form <u>Richard Montalbano</u> Daytime Telephone Number <u>(813) 960-2448</u>					

CR2E003 (8/98)