FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

900 FF 11			96 DEC 23 PM 2: 38			
1. Name of Lirnited Partnership	1a. DOCUMEN A25502	96 DEC 23 PM 2: 38				
EXAS INVESTMENT, LTD.						
Mailing Address 132 MINORCA AVE. CORAL GABLES FL 33134	Principal Office Address 132 MINORCA AVE. CORAL GABLES FL 33134	IINORCA AVE.		3. Date Formed or Registered 11/20/1987 3a. Date of Last Report 03/25/1996 4. State or Country of Formation		
			03/25/1996			
2. Mailing Address	2a. Principal Office Address		FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number NOT APPLICABLE	L	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired		\$8.75 Additional Fee Required	
Zip Country	Zip Cour	ip Country		8. Make check payable to Dept of State (See reverse side for fee information		
9. Name and Address of Curren	at Registered Agent		10. If changed, new Registere	d Agent/Office		
		Name				
2600 GRANADA BLVD. CORAL GABLES, FL FL 33134		Streel Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt. #, etc.				
	Ci	ty		FI.	Zip Code	
agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)	r registered agent, or both, in the State of Florida. S ns of section 620, 192, Florida Statutes.	Such change was a	authorized by its general partner(s). I her	eby accept the	appointment of registered	
A GENERAL PARTNER THAT	' IS A CORPORATION, LIM IT BE REGISTERED AND A	ITED PAR ACTIVE W	TNERSHIP OR OTHE ITH THIS OFFICE.	R BUSI	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Nu			11c.	Registration/ Document Number	
TEXAS INVEST. GENERAL	132 MINORCA AVE.	C	CORAL GABLES FL	M	82508	
CENTENNIAL TRADE INC.	P.O. BOX 6-1014,ELDOR	F	PANAMA,REP.OF PANAMA		F9400001441	
			90002 -12/3 ****	17960 208.75	5296 1004003 ****208.75	
Note: General partners MAY NO	T be changed on this form; a					

1. Ido 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 fimited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

JOHN S. SULLIVAN

805-381-8340

CR2E003 (6/96)