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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



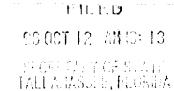
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

DOCUMENT # A25502



TEXAS INVESTMENT, LT	D. QG-PCM		
Mailing Address 132 MINORCA AVE. CORAL GABLES FL 33134	Principal Office Address 132 MINORCA AVE. CORAL GABLES FL 33134	3. Date Formed or Registered 11/20/1987 38. Date of Last Report 10/03/1997	5a. Capital Contributions as Shown on record. \$10,000.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address Suite, Apt. #, etc.	2a. Principal Office Address Suite, Apt. #, etc.	4. State or Country of Formation FL 6. FEI Number	to dete:
City & State	City & State	NOT APPLICABLE 7. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional Fee Required
Zip Country	Zip Country	8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee Information)
9. Name and Address of Current Registered Agent Name		10. If changed, new Registered Agent/Office	
SULLIVAN, JQHN 2600 GRANADA BLVD. CORAL GABLES, FL FL 33134 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-name		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Light Code	
for the purpose of changing its registere	d office or registered agent, or both, in the State of Florida. Such che obligations of section 620.192, Florida Statutes.	thefship organized or registered under the taws of the linge was authorized by its general partner(s). I hereby	y accept the appointment of registered
	THAT IS A CORPORATION, LIMITE MUST BE REGISTERED AND ACT	D PARTNERSHIP OR OTHE	
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
TEXAS INVEST. GENERAL	132 MINORCA AVE.	CORAL GABLES FL	M 62 508
CENTENNIAL TRADE INC.	P.O. BOX 6-1014,ELDOR	PANAMA,REP.OF PANAMA	F94000001441
		5000026 -10/17/9 ****15	661954 9801002002 8.75 ****158.75

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 fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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:

ther Signing Form John S. Sullivan, President of

Bulle