TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



EURAMERICAN INVESTMENT LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A27693 SECRETARY OF STATE CORPORATIONS

98 JAN 26 PM 1:20



DATE 12-26-97

(HA7) 396-205L

				0.01/28			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
4786 WEST IRLO BRONSON MEMORIAL HWY	· · · · · · · · · · · · · · · · · · ·		12/30/1988		1		
KISSIMMEE FL 32741				3a. Date of Last Report	\$2,000.00		
				12/26/1996	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address Suite, Apt. #, etc.			4. State or Country of Formation			
Sulta dat it ata			· .	FL			
Suite, Apt. #, etc.	Solie, Apr. W. etc.			6. FEI Number 59-2947735	Applied For Not Applicable		
City & State	City & State			7. Certificate of Status Desired			
Zip Country	Zip Country				\$8.75 Additional Fee Required		
				8. Make check payable to: Dept. of S	tate (See rev	erse side for lee information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office					
NADD JOHN SCOTT 4788 W. IRLO BRONSON MEMORIAL HWY. KISSIMMEE FL 34746		Name Street Address (P.O. Box Number Is Not Acceptable)					
							Suite, Apt. #, etc.
			City			FL 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			
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)	11a. Address of Each General Pariner (Do NOT Use Post Office Box Numbers)		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
EURAMERICAN INVESTMENT CONSU	4786 W. IRLO BRONSON		KISSIMMEE FL 8000024 -01/29/3 ****165		M68575		
					166383 9801106016 .00 ****165.00		
Note: Committee Have Note to							
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.							

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.

John Scots World