FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A29795

DIVISION OF CORPORATIONS

98 JAN -2 AMII: 03



Daylime Telephone Number (305)864-7992

MARJO AND GRA LTD.				
			01/15	
Mailing Address	Principal Office Address		3. Date Armed or Registered	5a. Capital Contributions as Shown on record.
944-COLLING-AVE MIXMI-BEACH FL-69139	MIATH BEACH LT 33138		03/19/1990 3a. Date of Last Report	\$250,000.00
			04/10/1997	5b. Amount of Capital Contributions in FLORIDA
2. Malling Address 40 GINO CATTAROSSI	28. Principal Office Address Of GIND CATTAROSSI		4. State or Country of Formation	250,000.00
Suite, Apt. Hetc. 8777 COLLINS DUE #1501	Suite, Apt. #, etc. 8777 COLLINS AVE *1501 City & State		6. FEI Number 65-0183836	Applied For Not Applicable
SURPSIDE FL	SURFSIDE, FL Zip Country 33154		7. Certificate of Status Desired	\$8.75 Additional Fee Required
331SY Country			Make check payable to: Dept. of State (See reverse side for fee information	
9. Name and Address of Current	Registered Agent		10. If changed, new Registers	nd Agent/Office
for the purpose of changing its registered office or registered agent, or both, in the State of		Street Address (P.O. Box Number is Not Acceptable) Sulte, Apt. #, etc. CISULES DE Tap Code T		
agent. I am (amiliar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	s of section 620 192, Florida Statutes.		DATE	
A GENERAL PARTNER THAT	IS A CORPORATION, I I BE REGISTERED AN	IMITED PAR	TNERSHIP OR OTHE	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Br			11c. Registration/ Document Number
MARJO AND GRA, INC.	944 COLLINS AVE		IAMI BEACH FL	L56782
	8777 COLLING F #1501 Surfside, FL 3	33154	400002 -01/2 ****	24077444 1/38-01134-008 541.25 ****541.25
Note; General partners MAY NOT	be changed on this form	n; an amendm	ent must be filed to ch	ange a general partner.

I de 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 lia firity 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 the 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.

Typed or Printed Name of General Partner Signing Form MARGO AND GRA TINE.