

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

98 MAR 23 PM 3: 00



1. Name of Limited Partnership GMT PARTNERS LIMITED		1a. DOCUMENT # A30405	
Mailing Address 8105 HARDING AVENUE MIAMI BEACH FL 33141		Principal Office Address 8105 HARDING AVENUE MIAMI BEACH FL 33141	
2. Mailing Address 10066 BAY HARBOR TERR Suite, Apt. #, etc.		2a. Principal Office Address 10066 BAY HARBOR TERR. Suite, Apt. #, etc.	
City & State BAY HARBOR ISLANDS, FL		City & State BAY HARBOR ISL. FL	
Zip 33154		Country USA	
		3. Date Formed or Registered 07/19/1990	
		3a. Date of Last Report 12/23/1996	
		4. State or Country of Formation FL	
		5a. Capital Contributions as Shown on record. \$20,000.00	
		5b. Amount of Capital Contributions in FLORIDA to date:	
		6. FEI Number 65-0253704 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		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)			

9. Name and Address of Current Registered Agent GLAZER, DONALD J 8105 HARDING AVENUE MIAMI BEACH FL 33141		10. If changed, new Registered Agent/Office Name DONALD J. GLAZER Street Address (P.O. Box Number is Not Acceptable) 10066 BAY HARBOR TERRACE Suite, Apt. #, etc. City BAY HARBOR ISLANDS FL Zip Code 33154	
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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 **3-12-98**

**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) JARAD SOUTH, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 6990 NW 37TH COURT	11b. City, State & Zip Code MIAMI FL	11c. Registration/Document Number K92007
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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

DATE **3-12-98**

Typed or Printed Name of General Partner Signing Form

DONALD J. GLAZER

Daytime Telephone Number

(315) 868-8681

CR2E003 (12/97)