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

LIMITED PARTNERSHIP ANNUAL REPORT

BCK VENTURES-1991, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Sec≨;tary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A31091

98 JAN 14 AM 8: 58



Mailing Address ONE SOUTH ORANGE AVE SUITE 300 ORLANDO FL 32801	Principal Office Address ONE SOUTH ORANGE AVE SUITE 300 ORLANDO FL 32801		3. Date Formed or Registered 01/30/1991 3a. Date of Last Report 09/18/1996 4. State or Country of Formation	5a. Capital Contributions as Shown on record. \$340,000.00 5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address One South Orange Ave	2a. Principal Office Address One South Orange AVe		FL	340,000,00
Suite, Apt. #, etc. Fifth FLoor	Suite, Apt. #, etc. Fifth FLoor		6. FEI Number 59-3044897	☐ Applied For
Orlando, FL 32801	City & State Orlando, FL 32801		7. Certificate of Status Desired	Not Applicable \$8.75 Additional
Zip Country 3 2 8 0 1	Zip Country 32801		8. Make check payable to: Dept. of	\$8.75 Additional Fee Required State (See reverse side for fee Information)
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office	
for the purpose of changing its registered office or registered agent, or both, in the State of Fi agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes SIGNATURE (Registered Agent Accepting Appointment)		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code Zip Code Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. Zip Code Zip Code DATE LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY		
MUST	BE REGISTERED AN	D ACTIVE	WITH THIS OFFICE.	
11. Name(s) of General Partner(s) BCK ACQUISITION, LTD.	11a. (Do NOT Use Post Office Br	ox Numbers)	1b. City, State & Zip Code ORLANDO FL 32801	11c. Hegistration/ Document Number
	Fifth FLoor	1	7000024 01/29/ *****44 7000024 01/29/	116597 0 9801111001

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. do hereby certify that the Information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of

orporations from any hability of 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 ate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee is annual report is true and acc empowered to execute this rep-

SIGNATURE

Typed or Printed Name of General Partner Signing Form

MIRC KATUEN

407 206-2000

Daytime Telephone Number