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 # A32278

FILED

98 FEB -6 PM 3: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| LOGE TOND TARRIERO, ET | J. 48 | CM | \ | | |
|--|---|---|--|---|--|
| falling Address | Principal Office Address | | 3. Date Formed or Registered | 58. Capital Contributions as Shown on record. | |
| MOI S.W. 16TH TERRACE | 8401 S.W. 16TH TERRACE | | 11/21/1991 | \$1,250,000.00 | |
| MAMI FL 33155 | MIAMI FL 33155 | | 38. Date of Lest Report | | |
| | | | 01/06/1997 | 5b. Amount of Capital Contributions in FLORIDA to date: | |
| 2. Malling Address | 2a. Principal Office Address | | 4. State or Country of Formation | to date. | |
| Dulla Anh 4 da | Suito Ant # oto | | FL | | |
| Sulte, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number | Applied For | |
| City & State | City & State | | 65-0245586 | Not Applicable | |
| Zip Country | Zip Country | | 7. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| -tp Goonly | | | 8. Make check payable to: Dept. of | 8. Make check payable to: Dept. of State (See reverse side for fee informat | |
| 9. Name and Address of Current Registered Agent | | 10. If changed, new Registered Agent/Office | | | |
| CAPOPO MANIELANA D | | Name | | | |
| SAEGER, WILLIAM B. 8401 S.W. 18TH TERRACE | | Street Address | Streel Address (P.O. Box Number Is Not Acceptable) | | |
| MIAMI FL 33155 | Suite, Apt. #, etc. | | | | |
| HIRMIN I E GO 100 | City | | | Zip Code | |
| | | | | <u>FL</u> | |
| 10a, Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office o spent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) _ A GENERAL PARTNER THAT MUS | ns of section 620.192, Florida Statutes. WB Sarges | LIMITED P | DATE | 12/18/97 | |
| Name(s) of General Partner(s) | 11a. Address of Each General (Do NOT Use Post Office Bo | al Partner ox Numbers) | 1b. City, State & Zip Code | 11c. Registration/ Document Number | |
| HEDGE FUND MANAGEMENT, INC. | 8401 S.W. 16TH TERRAC | | MIAMI FL 33155 | S28467 | |
| SAEGER, WILLIAM B. | 8401 S.W. 16TH TERRAC | | MIAMI FL 33 156 | 429301 0 /9801097001 35.00 ****535.00 | |
| a | | | | | |
| Note: General partners MAY NOT | T be changed on this forn | n; an amen | dment must be filed to cha | ange a general partner | |
| f do have by certify that the information supplied with Corporations from any liability of non-compliance with this annual report is true and accurate and that my s | h Section 119.07(3)(k) in the event that the in | formation supplied | is deemed exempt from public access. I furth | er certify that the information indicated | |

Typed or Printed Name of General Partner Signing Form William B Scarce Daytime Telephone Number 301) 26405+