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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



OUTBACK STEAKHOUSE OF WASHINGTON, D.C., LTD.

FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A33138

from I larve from from 97 NOV 20 AH 10: 41 SECRETARY OF STATE TALLAHASSEE FLORIDA



Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
550 NORTH REO STREET, SUITE 200	550 NORTH REO STREET. SUITE 200 TAMPA FL 33609		07/02/1992	\$1,300,008.00
TAMPA FL 33809			3a. Dale of Last Report	
			10/25/1996	5b. Amount of Capital Contributions in FL ORIDA to date
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	1,300,008
· · · · · · · · · · · · · · · · · · ·			FL	1,300,00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		59-2848217	Not Applicable
			7. Certificate of Status Desired	\$8.75 Additional fee Required
Zip Country	Zip Country		8. Make check payable to: Dept. of	State (See reverse side for fee Information)
9. Name and Address of Current Registered Agent		T	10. If changed, now Registered Agent/Office	
WARANI MARRIA		Name		
KADOW, JOSEPH J		Street Address (P.O. Box Number Is Not Acceptable)		
550 NORTH REO STREET, SUITE 200 TAMPA FL 33609		Suite, Apt. #, etc.		
IMMEN PL 00009				
		City FL 7ip Code		
10a. Pursuant to the provisions of sections 620, 1051 and 620, 192, Florida Statutos, 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 affect 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 Statutos. 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 Genera (Do NOT Use Post Office Bo	x Numbers) 1	1b. City, State & 7ip Code	11c. Registration/ Document Number
OUTBACK STEAKHOUSE OF FLORID	550 N. REO ST., #200		TAMPA FL	J89475
			4000023 -12/02/ ****\$54	8603448 /9701031016 /1.25 ****\$41.25
			BK 11/2i	(97
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 the Corporations from any liability of non-compliance with	is filing is voluntarily furnished and doos no Section 119.0 (3)(k) I the event that the int	qualify for the exe ormation supplied	emption stated in Section 119.07(3)(k), Florida is deemed exempt from public access. I further	Statutes, I release the Division of er certify that the information indicated on

same legal effects as if made under oath. I further certify thal I am a General Partner of the limited partnership, receiver or trustee 11/11/97

813/282-1225

SIGNATURE .

Typed or Printed Name of General Paring

this annual report is true and accurate and that my

empowered to execute this report as required by

Joseph J. Kadow, Vice President

Daytime Telephone Number