

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JAN 13 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RM

| | |
|--------------------------------|---------------------------------|
| 1. Name of Limited Partnership | 1a. DOCUMENT # A33411 |
| AEGIS HOLDINGS, LTD. | |

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|---|---|---|--|
| Mailing Address 11601 BISCAYNE BLVD # 200B MIAMI FL 33181 | Principal Office Address 11601 BISCAYNE BLVD. # 200 B MIAMI F 33181 | 3. Date Formed or Registered 9/14/92 | 5a. Capital Contributions as Shown on record 300,200.00 |
| 2. Mailing Address | 2a. Principal Office Address | 3a. Date of Last Report 9/11/95 | 5b. Amount of Capital Contributions in FLORIDA to date: 300,200.00 |
| Suite, Apt #, etc. | Suite, Apt #, etc. | 4. State or Country of Formation FL | 6. FEI Number 65-0351362 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable |
| City & State | City & State | 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) |
| Zip | Country | Zip | Country |

| | |
|--|---|
| 9. Name and Address of Current Registered Agent KRAMER, ROBERT M 4000 HOLLYWOOD BLVD, SUITE 485 S. HOLLYWOOD, FL 33021 | 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc. City FL Zip Code |
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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 _____

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

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|--|---|--|--|
| 11. Name(s) of General Partner(s) PRESTIGE GROUP INTERNATIONAL Inc | 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11601 BISCAYNE BLVD # 200B MIAMI. | 11b. City, State & Zip Code MIAMI FL | 11c. Registration/Document Number L54001 |
|--|---|--|--|

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CR2E003 (6/96)

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 *[Signature]* DATE **JAN 9, 1997**
Typed or Printed Name of General Partner Signing Form **MICHAEL GREGORY** Daytime Telephone Number **(305) 892-8949**