FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999

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

98 JAN 11 AM 11:20

1. Name of Limited Partnership

1a. DOCUMENT # A98000006020

SANDPOINT FINANCIAL, LTD.

Mailing Address	Principal Office Address
404 WASHINGTON AVE SUITE 120 MIAMI BEACH, FL 33139	404 WASHINGTON AVE SUITE 120 MIAMI BEACH, FL 33139

2. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Filed (for First Year)
11/02/92

3a. Date of Last Report
02/11/98

4. State or Country of Formation
FL

5a. Capital Contributions Received
$4,008,525.03

5b. Amount of Capital Contributions in FLORIDA Recorded
$4,000,654.00

6. FEI Number
65-037065
☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

8. Make Checks Payable to: Department of State (See Fee Schedule for Other Charges)

9. Name and Address of Current Registered Agent

THREATT, Robert R.
404 WASHINGTON AVE
SUITE 120
MIAMI BEACH, FL 33139

10. Name of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. # etc.
City **FL** Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192 Florida Statutes, the above named limited partnership desiring to transact business 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 the 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.

11. Name(s) of General Partner(s)	**11a.** Address of Each General Partner (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Registration/Document Number
SANDPOINT FINANCIAL, CORP.	404 WASHINGTON AVE SUITE 120	MIAMI BEACH, FL 33139	F 92000000081

CR2E003 (8/96)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I understand the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) 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 effect as if made under oath; that I am a General Partner of the limited partnership or a receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Robert R. Threatt V.P. G.P. DATE 1/7/99

Typed or Printed Name of General Partner Signing Form: ROBERT R. THREATT Daytime Telephone Number: (305) 532-2519