## 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

1. Name of Limited Partnership

DOCUMENT #

99 JAN 22 PHI 12: 44

	A93000000680	
BIRILLI, LTD.		
Mailing Address	Principal Office Address	
960- 41ST STREET. SUITE 401 MIAMI BEACH-EL 33140	960- 41ST STREET. SUITE 401 MIAMI BEACH FL 33140	
2. Mailing Address	2a. Principal Office Address	
Suite, Apt. #, etc	Suite, Apt. #, etc.	
City & State MINTER & CRCII	City & State	
City & State & CALI FI	Zip Count	ry
	-	

3. Dire Formed or Registered	5a. Capital Contributions as Shown on record
06/29/1993 3a. Date of Last Report	\$150,000.00
12/19/1997 4. State or Country of Examples	5b. Amount of Capital Contributions in FLORIFIA to date
FL	150,000.00
6. FEE Number 65-04 19660	Applied For Not Applicable
7. Cerbicate of Status Defined	\$8.75 Additional Fee Required

8. Make the kipayable to Dept. of State (Sec reverse side for fee information)

<ol> <li>Name and Address of Current Registered Agent</li> </ol>	10. If Oranged, new Registered Agent/Office	
	Name	
CENCEBAUGH, SANDRA 960- 41ST STREET, SUITE 401	Street Address (P.O. Box Number Is Not Acceptater)	
MIAMI BEACH FL 33140	Suite, Apt. #, etc.	
	Crty FL 200 C	ode

10a. Pursuant to the provisions of sections 620-1051 and 620-192, Florida Statutes, the above named limited partnership organized or registered under the Taws 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 Flonda. Such change was authorized by its general particles.) Thereby are epititic appointment of registered agent I am familiar with, and accept the obligations of section 620 192, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

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

BIRILLI, INC.

11.

Name(s) of General Partner(s)

Typed or Printed Name of General Partner Signing Form

960-41ST STREET, SUI

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

11b.

City, State & Zip Code

11c. Registration?
Ducument Number

MIAMI BEACH FL 33140

P93000045970

24.00000274322225 S 02/09/39 -01043 -001 

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)(4). Florida Statutes if release the Division of Corporations from any lability of non-compliance with Section 119 07(3)(k) in the event that the Information supplied is deemed exempt from public access. Hurther certify that the information tude aled on this annual report is true and accurate and that my signature shall have the same legal effects as if made under earth. I further certify that I access Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Stalutes.

SIGNATURE \_

EMPLO CHEVALLARD

DATE\_ 12 ~ 30 - 139 8

Daytine Telephone Number: 305 - \$324 3 X4