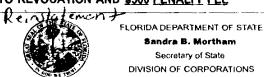
FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



ANNUAL REPORT 1999	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
1. Name of Limited Partnership	1a. DOCUMENT # A9300000830		90 MAY	27 unit 5/11
PORTA HOLDINGS, LTD.				
Mailing Address 13925 58TH STREET N. CLEARWATER FL 33760	Principal Office Address 13925 S8TH STREET N. CLEARWATER FL 33760		3. Date Formed or Registered 08/10/1993 3a. Date of Last Report 04/07/1998	5a. Capital Contributions as Shown on record. \$12,301,800.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	12,301,800
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc City & State		6. FEI Number 59-3195436	Applied For Not Applicable
Zip Country	Zıp	Country	7. Certificate of Stalus Desired 8. Make check payable to Dept of the state of Stalus Dept of the state of Stalus Dept of the	\$8.75 Additional Fee Required State (See reverse side for fee information)
9. Name and Address of Current	Registered Agent	Name	10, If changed, new Registered	5 Agent/Office
WOHLWEND, BETH C/O MELITTA N.A., INC. 13925 58TH STREET N. CLEARWATER FL 33760		Street Address (P.O. Box Number Is Not Acceptable)		
10a. Pursuant to the provisions of sections 620.1051 and				
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo			11c. Registration/ Document Number
PORTA HOLDINGS II, INC.	/3925 58 14 5 ; 17755 U.S. 19 NORTH,	FN	3376 8 Learwater Fl 34624	P93000056239
Note: General partners MAY NOT	be changed on this form	n; an amendm	ent must be filed to cha	ange 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), Fronda Statutes Trelease 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 truste
	empowered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form Michael O'Keefe