

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

FILED

97 OCT 16 PM 2:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # A94000000090
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CHINA GROUP LIMITED PARTNERSHIP	96-AR CM
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Mailing Address 9101 S.R. 535 ORLANDO FL 32836	Principal Office Address 9101 S.R. 535 ORLANDO FL 32836	3. Date Formed or Registered 01/20/1994	5a. Capital Contributions as Shown on record. \$10,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report 01/13/1997	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation FL	6. FEI Number 59-3416273 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	7. Certificate of Status Desired <input checked="" 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 CYNTHIA YU 9101 S.R. 535 ORLANDO FL 32836	10. If changed, new Registered Agent/Office Name CYNTHIA YU c/o MARCO POLO COLUMBUS & FERRARI Street Address (P.O. Box Number Is Not Acceptable) 9101 S.R. 535 Suite, Apt. #, etc. City ORLANDO Zip Code FL 32836
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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 9/11/97

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) AMERICANA HERITAGE GROUP, IN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 9099 S.R. 535	11b. City, State & Zip Code ORLANDO FL 32836	11c. Registration/ Document Number S32787
200002324512--7 -10/20/97-01125--007 ****173.75 ****173.75			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.
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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.
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SIGNATURE  DATE 10/10/97	Typed or Printed Name of General Partner Signing Form N. YING Daytime Telephone Number 409-876-1793
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CR2E003 (6/97)