


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		1a. DOCUMENT # A94000000186	
ORLANDO REAL ESTATE DEVELOPMENTS, LTD. <i>aa-ar cm</i>			
Mailing Address		Principal Office Address	
6665 CRISTINA MARIE DRIVE ORLANDO FL 32835		6665 CRISTINA MARIE DRIVE ORLANDO FL 32835	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip Country		Zip Country	

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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3. Date Formed or Registered 02/15/1994	5a. Capital Contributions as Shown on record \$150,000.00
3a. Date of Last Report 12/16/1997	5b. Amount of Capital Contributions in FLORIDA to date \$150,000.00
4. State or Country of Formation FL	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. FEI Number 59-3230294	<input type="checkbox"/> \$8.75 Additional Fee Required
7. Certificate of Status Desired	
8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
HWANG, CHARLES 6665 CRISTINA MARIE DRIVE ORLANDO FL 32835	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 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.**

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
GLOBAL ASSOCIATES INTERNATIO	6665 CRISTINA MARIE D	ORLANDO FL 32835	P94000010537

4000002762094-3
02/02/99-01072-004
***526.25 ***526.25

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

Charles Hwang, President

DATE

12/29/98

Typed or Printed Name of General Partner Signing Form

CHARLES HWANG

Daytime Telephone Number

407-293-4162

CR2E003 (8/98)