FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A9400000360

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Mailing Address C/O J. BOB HUMPHRIES. ESQ. 501 EAST KENNEDY BLVD SUITE 1700 TAMPA FL 33602 Principal Office Address 241 SOUTH ATLANTIC BLVD. FT. LAUDERDALE FL 33315		3. Date Formed or Registered 03/22/1994	5a. Capital Contributions as Shown on record.	
		3a. Date of Last Report 12/31/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 2a. Principal Office Address		4. State or Country of Formation	to date	
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State		6. FEI Number 59-3231622	Applied For Not Applicable	
Zip Country	Zip Count		\$8.75 Additional Fee Required	
		8. Make check payable to Dept of	of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
' HUMPHRIES, J. BOB ESQ. C/O FOWLER, WHITE, GILLEN, ET AL , 501 EAST KENNEDY BLVD., SUITE 1700 TAMPA FL 33602		Name Street Address (P.O. Box Number Is Not Acceptable)		
for the purpose of changing its registere agent. I am familiar with, and accept the	20.1051 and 620.192, Florida Statutes, the above-named limited office or registered agent, or both, in the State of Florida. Sur a obligations of section 620.192, Florida Statutes.	ch change was authorized by its general partner(s). I hen	eby accept the appointment of registered	
A GENERAL PARTNER	THAT IS A CORPORATION, LIMI MUST BE REGISTERED AND A	ITED PARTNERSHIP OR OTH CTIVE WITH THIS OFFICE.		
11. Name(s) of General Partner(s)	Address of Each General Partner 11a. (Do NOT Use Post Office Box Numb		11c. Registration/ Document Number	
PENROD, JACK	241 SOUTH ATLANTIC BL	FT. LAUDERDALE FL 333		
		3c 23-99	,	

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

J. Bob Humphries, as agent for Jack Penrod

3/12/99

(813) 222-1173