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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9400000454**

97 DEC - 1 AM 8: 4.7
TALLAMASSEE FLORIDA



			4	Z) 1/ 1/24
				JA 1
alling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record
GROVE ISLE DRIVE. #801	3 GROVE ISLE DRIVE. #801		03/31/1994	\$740,000,00
MAMI FL 33133	MIAMI FL 33133		3a. Date of Last Report	\$746,200.00
			11/26/1996	5b. Amount of Capital Contributions in FLORIDA
2. Malling Address	2a. Principal Office Address		4. State or Country of Formation	to date:
			FL	746,200.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		65-0477679	Not Applicable
Zip Country	Z(p) Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required
		····	8. Make check payable to: Dept. of	State (See reverse side for fee informat
9. Name and Address of Cu	rrent Registered Agent	<u> </u>	10. If changed, new Registere	d Agent/Office
BEDOED ADOLDIL (Name		
BERGER ADOLPH J. 3 GROVE ISLE OR		Street Address (P.O. Box Number Is Not Acceptable)		
3 GRAVE ISLE OR		Stroot Address (P.6	J. Box Northber is Not Acceptable)	
3 GROVE ISLE DR. # 801		Street Address (P.t Suite, Apt. #, etc.	5. Box Number is 1400 Neceptable)	
			5 Box Notificer is Not Acceptable)	Zip Code
# 801 MIAMI Ft. 33133 10a. Pursuant to the provisions of sections 620 105	1 and 620.192, Florida Statutes, the above-name	Sulte, Apt. #, etc. City Ilimited partnership of	organized or registered under the laws of the	FL ne State of Florida, submits this stateme
# 801 MIAMI FL 33133 Og. Pursuant to the provisions of sections 620 105 for the purpose of changing its registered office agent. Fam familiar with, and accept the obligations of the purpose of the pur	e or registered agont, or both, in the State of Flori alions of section 620.192, Florida Statutes.	Suite, Apt. #, etc. City I limited partnership of da. Such change was	organized or registered under the laws of the authorized by its general partnor(s). I here DATE	FL he State of Florida, submits this statement of registers
# 801 MIAMI FL 33133 10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registered office agent. Fam familiar with, and accept the obligations of the purpose Agent Accepting Appointment	e or registered agont, or both, in the State of Flori alions of section 620.192, Florida Statutes.	Suite, Apt. #, etc. City I limited partnership of da. Such change was	organized or registered under the laws of the authorized by its general partnor(s). I here DATE RTNERSHIP OR OTHE	FL he State of Florida, submits this statement of registers
# 801 MIAMI FL 33133 10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registered offic agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment	e or registered agent, or both, in the State of Flori alions of section 620.192, Florida Statutes. AT IS A CORPORATION, L IST BE REGISTERED ANI	Sulte, Apt. #, etc. City I limited partnership of da. Such change was IMITED PAID ACTIVE W	organized or registered under the laws of the authorized by its general partner(s). I here DATE RTNERSHIP OR OTHE VITH THIS OFFICE.	FL he State of Florida, submits this statement of registers
# 801 MIAMI FL 33133 10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registored office agent. I am familiar with, and accept the oblight AGENERAL PARTNER THAM	e or registered agent, or both, in the State of Flori alions of section 620.192, Florida Statutes. AT IS A CORPORATION, L UST BE REGISTERED ANI	Sulte, Apt. #, etc. City Ilmited partnership of da. Such change was IMITED PAI DACTIVE V Partner (Numbers) 11b	organized or registered under the laws of the authorized by its general partner(s). I here DATE RTNERSHIP OR OTHE VITH THIS OFFICE.	FL ne State of Florida, submits this statement by accept the appointment of registers R BUSINESS ENTITY 110 Registration/

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 T 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

rate and tracting signature strain have the same legal effects as a made under earn, trainier certify that I am a General Partner of the as required by chapter 620, Florida Stalutos.

ELLE INVENTS, INC., FEW I Pushing.

DATE.

Signing Form. A BOUGH J. BELLER, MENSENT Daytime Telephone Number.

3R2E003 (6/97)