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 FILED

98 FEB 25 FN 2:25

SECRET CONTROL TALLAHOLDE IL FLORIDA

Name of Limited Partnership		1a. DOCUMENT # A9400000927			
FORT SUMMIT DEVELOPME	NTS LTD.			8/11/ 30 /11/ 30 /11/ 30 /11/ 30 /11/ 10/11/ 110/1 100/	
Mailing Address	Principal Office Address		3. Date Formed or Registered	d 5a. Capital Contributions as Shown on record.	
3750 WEST 16TH AVENUE SUITE 126-U		3750 WEST 16TH AVENUE SUITE 126-U HIALEAH FL 33012		\$1,300,000.00	
HIALEAH FL 33012	HIALEAR FL 33012				
				5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		(0.00)	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		FL 6. FEI Number		
7525 N.W. 8 Street, #201	7525 N.W. 8 Str	7525 N.W. 8 Street, #201		Applied For Not Applicable	
City & State Miami, Florida	City & State Miami, Florida			\$8.75 Additional Fee Required	
Zip Country	Zip	•		8. Make check payable to: Dept. of State (See reverse side for fee information)	
33126 U.S.A.	33126	U.S.A.	- Make Check payable to: Dept. of	State (COO TOTOLOGISTO TOTOLOGISTO	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
LACE CONTAINS M		Name LAGE, GONZALO M.			
LAGE, GONZALO M 3750 West 16th Avenue, Ste 126-u		7525 Suite, Apt. #, etc. Suit City		Box Number is Not Acceptable) N.W. 8 Street	
HIALEAH FL 33012					
				Zip Code	
			ami	FL 33126	
10a. Pursuant to the provisions of sections 620 105 for the purpose of changing its registered office agent. I am lamiliar with, and accept the obligations of the purpose of changing its registered	e or registered agent, or both, in the State of	lamed limited partnership f Florida. Such change w	as authorized by its general partner(s). I her	eby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment	l) <u>.</u>		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 Ge	noral Bartons	b. City, State & Zip Code	11c. Registration/ Document Number	
THAIS INVESTMENTS CORP.	3750 WEST 16TH AVE		HIALEAH FL 33012	P93000067597	
		}	900002 -03/04 *****	4464696 4 4/8801002011 87 50 *****535.00	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. No hereby certify that the information supplied with this filling 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 ____

Daytime Telephone Number