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

LIMITED PARTNERSHIP ANNUAL REPORT

1998

ZALLA ANNA MARIA, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership 1a. DOC

Typed or Printed Namo of General Partner Signing Form _ WI ELIAM R.

A94000000979

1a. DOCUMENT #

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC - 1 AM II: 20



DATE 11-24-97

Daylimo Telephone Number 813- 360-0574

alling Address			2	Data Formed or Posistored	50 0	al Contributions as	
-	Principal Office Address	Principal Office Address		3. Date Formed or Registered		5a. Capital Contributions as Shown on record.	
941 E. VINA DEL MAR	2941 E. VINA DEL MAR ST. PETERSBURG BEACH FL 33706			07/20/1994 3a. Date of Last Report		\$25,000.00	
T. PETERSBURG BEACH FL 33706							
			J	10/02/1996	5b. Amou Conti	int of Capital ibutions in FLORIDA	
. Mailing Address	2a. Principal Office Address		4.:	4. State or Country of Formation		to date:	
And H. Ja		···		<u> </u>			
uite, Apt. #, etc.	Suite, Apt #, etc. City & Stale		"	6. FEI Number 59-3250137		Applied For Not Applicable	
City & State			L				
ip Country	7ip	Zip Country		Certificate of Status Desired	\$8.75 Additional Fee Required		
			8.	8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Curr	rent Registered Agent			0. If changed, new Registe	red Agent/Office	_ v-	
		Name Name					
HOULIHAN, DEAN		Street Addr	ess (P.O. Box Nu	mber is Not Acceptable)			
2931 E. VINA DEL MAR ST. PETERSBURG BEACH FL 33706		Suite, Apt. #, etc		elc.			
OIL I ELECTODONIC DESCRIPTION		<u></u>					
		City				Zin Codo	
Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligation.	or registered agent, or both, in the State of						
for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the control of the c	or registered agent, or both, in the State of lions of section 620.192, Florida Statules. T IS A CORPORATION,	med limited partn Florida Such char	PARTNE	d by its general partner(s). I h	The State of Florecroby accept the	ida, submits II is stateme appointment of registerd	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the control of the c	or registered agent, or both, in the State of tions of section 620.192, Florida Statutes. T IS A CORPORATION, ST BE REGISTERED A	mod limited partn Florida Such char , LIMITED ND ACTIV	PARTNE	d by its general partner(s). I h	The State of Florecroby accept the	ida, submits II is stateme appointment of registere	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligated MATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA MU	or registered agent, or both, in the State of tions of section 620.192, Florida Statutes. T IS A CORPORATION, ST BE REGISTERED A	LIMITED ND ACTIV ORDINGER Partner Box Numbers	PARTNE /E WITH 11b.	DAT RSHIP OR OTH THIS OFFICE.	ER BUSII	ida, submits II iis stateme appointment of registers NESS ENTIT' Registration/	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the control of the c	T IS A CORPORATION, ST BE REGISTERED A Address of Fach Gon (Do NO), Use Post Oflice	LIMITED ND ACTIV ORDINGER Partner Box Numbers	PARTNE /E WITH 11b.	DAT RSHIP OR OTH THIS OFFICE. City, State & Zip Code ERSBURG BEACH	ER BUSII 11c. P94	nda, submits Illis stateme appointment of registers NESS ENTITY Registration/ Document Number	

ZALLA