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 # A9400000979

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC -3 AM 10: 05

| ZALLA ANNA MARIA, LTD. | | | | | |
|--|--|---|---|--|--|
| Mailing Address | Principal Office Address | | 3. Date Formed or Registered | 5a. Capital Contributions as Shown on record. | |
| 2941 E. VINA DEL MAR ST. PETERSBURG BEACH FL 33706 | 2941 E. VINA DEL MAR ST. PETERSBURG BEACH FL 33706 | | 07/20/1994 3a. Date of Last Report 12/01/1997 | \$25,000.00 5b. Amount of Capital Contributions in FLORIDA to date: | |
| 2. Mailing Address | 2a. Principal Office Address | | 4. State or Country of Formation | io dale. | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number | Applied For Not Applicable | |
| City & State | City & State | | 7. Certificate of Status Desired | \$8.75 Additional | |
| Zip Country | Zip Cour | ntry | 8. Make check payable to: Dept. of S | Fee Required tate (See reverse side for fee information) | |
| 9. Name and Address of Current Registered Agent | | | 10. If changed, new Registered Agent/Office | | |
| HOULIHAN, DEAN 2931 E. VINA DEL MAR ST. PETERSBURG BEACH FL 33706 10a. Pursuant to the provisions of sections 620,1051 and 620,192, Florida Statutes, the above-named | | Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code Ilmited 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. SIGNATI IRE (Registered Agent Accepting Acceptin | | | | | |
| 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 Parts (Do NOT Use Post Office Box Nur | ner mbers) 11b. | City, State & Zip Code | 11c. Registration/ Document Number | |
| ANNA MARIA ENTERPRISES, INC. | 2941 E. VINA DEL MAR | ST | T. PETERSBURG BEACH | P94000047774 | |
| Ĺ | | | 200002 ⁻ -12/03/ ****28 | 7065620 /9801079015 3.75 ****263.75 | |

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

ZALLA

empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

CR2E003 (8/98)

DATE NOV 30, 1998

Daytime Telephone Number 1-813-360-0574