FILE ON OR REFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOCA	ATION AND \$500 PENALT	Y FEE	• 					
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED				
1. Name of Limited Partnership	1a. DOCUMENT # A94000001258			99 JAN -6 PM 4: 18 SECKETART OF STATE TALLAMASSEE FLORIDA				
SHSPEC, LTD.								
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
6400 N. ANDREWS AVENUE	6400 NO. ANDREWS AVE			09/16/1994	ì			
FT. LAUDERDALE FL 33309	FT.LAUDERDALE FL 33309			3a. Date of Last Report	\$2,832.50			
			}	12/30/1997	5b. Amount of Capital Contributions in FLORIDA to date:			
		<u> </u>	4. State or Country of Formation		to date:			
2. Mailing Address	2a. Principal Office Address			FL	\$3,659.50			
*	Sulte, Apt. #, etc.			6. FEI Number 65-0524028	Applied For Not Applicable			
	City & State Zip Country			7. Certificate of Status Desired	\$8.75 Additional Fee Required			
Zip Country			-	8. Make check payable to: Dept. of State (See reverse side for fee information)				
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office					
BRYAN, DUKE W C/O STILES CORPORATION			Street Address (P.O. Box Number Is Not Acceptable)					
FT.LAUDERDALE FL 33309			City FL Zip Code					
10a. Pursuant to the provisions of sections 620,1051 and 620 for the purpose of changing its registered office or regist agent, 1 am familiar with, and accept the obligations of se	ered agent, or both, in the State of Florids							
SIGNATURE (Registered Agent Accepting Appointment)				DATE_				
A GENERAL PARTNER THAT IS MUST E	A CORPORATION, LI BE REGISTERED AND	MITED ACTIV	PARTI E WIT	NERSHIP OR OTHE H THIS OFFICE.	R BUSINESS ENTITY			
11. Name(s) of General Partner(s)	11a. Address of Each General I	Partner Numbers)	11b.	City, State & Zip Code	11c. Registration/ Document Number			
SHSPEC, INC. 6400 N. ANDREWS AVENU			FT. L	AUDERDALE FL 333	P94000063509 /			

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 indicate 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 of the empowered to execute this report as required by chanter \$20\$. Florida Stations. e legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

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Typed or Printed Name of General Partner Signing Form

Bryan W. Duke

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Daytime Telephone Number

CR2E003 (8/98)