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

DOCUMENT# A94000001863

FILED 97 OCT -3 AM II: 49 SEURETARY OF STA TALLAHASSEE, FLORIDA



RIBECCO, LTD.	C	18-AR CUS		i dadigii idha hani bidh bani b		1/0/ :1661 1511 61406 1141 10 8 1
Mailing Address	Principal Off-ce Address			3, Date Formed or Registered	ered 5a. Capital Contributions as Shown on record	
1375 WEST HILLSBORO BOULEVARD DEERFIELD BEACH FL 33442	1375 WEST HILLSBORO BOULEVARD DEERFIELD BEACH FL 33442			12/29/1994 3a. Date of Last Report	\$5,000,000.00	
			-	10/18/1996	5b. Amou Contri to date	nt of Capital butions in FLORIDA
2. Mailing Address	28. Principal Office Address	28. Principal Office Address		4. State or Country of Formation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Suite, Apt. #, etc.	Suite, Apt. #, etc			6. FEI Number	Applied For	
City & State	City & State	City & Stale		65-0563854 7. Certificate of Status Desired		Not Applicable
Zip Country	Zip	Country		Certificate of Status Desired Sa.75 Additional Fee Required Nake check payable to: Dept. of State (See reverse side for fee Information)		
9. Name and Address of Curren	1 Registered Agent	10. If changed, new Registered Agent/Office				
ANDERSON, LARRY W 1375 WEST HILLSBORO BOULEVARD DEERFIELD BEACH FL 33442		Street Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt. i	#, etc.			
		City FL Zip Codo				
agent I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT		, LIMITED	PARTI	DATE NERSHIP OR OTHE		
11. Name(s) of General Partner(s)	Address of Each Ge 11a. (Do NOT Use Post Office	navel Dayland	11b.	City, State & Zip Code	11c.	Registration/ Document Number
RIBECCO REALTY MANAGEMENT, I	1375 WEST HILLSBORO B		DEERFIELD BEACH FL 33		P94000093947	
				300002 -10/07 *****5	3134 79701 50.00	
Note: General partners MAY NOT	be changed on this fo	rm; an am	endmen	t must be filed to chi	ange a ge	eneral partner.
12. I do horeby certify that the information supplied with Corporations from any hability of non-compliance will this argual report is true and accurate and that my seempowered to execute this report as required to the	h Section 119.07(3)(k) in the event that the grature shall have the same legal effects that Gat, Florida Statutes.	io information supp s as if made under	olled is deamo oath. I further	ed exempt from public access. I furth r certily that I am a General Partner o	er certify that th I the limited par	e information indicated on Inorship, receiver or trustee
SIGNATURE				DATE		
Typed or Printed Name of Goneral Partner Signing Form	LARRY W. ANDE	rson	U.P.	Daytime Telephone Number ${\cal G}$	54.42	1-7888