FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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	A9300000493						
JBH, LIMITED COMPANY, LTD.							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
5821-C LAKE WORTH ROAD GREENACRES FL 33463-3209	5821-C LAKE WORTH ROAD GREENACRES FL 33463-3209		-	03/28/1995 3a. Date of Last Report	\$40.00		
				12/31/1997	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to dat	e:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 65-0588523	Applied For Not Applicable		
City & State	City & State		-	7. Certificate of Status Desired			
Zip Country	Zip Country		_	Sample of Status Desired Sample of S			
9. Name and Address of Current Registered Agent Name				10. If changed, new Registered Agent/Office			
ALEXANDER, KAREN L ESQ. A Lexa			and	ndra C. Carpenter, CPA			
C/O ALEXANDER DAMBRA & DUHL, P.A.			ما م	20. Box Number is Not Acceptable) Joble Management Company			
5737 OKEECHOBEE BLVD., SUITE 201 Suite, Apt. #, etc.			Ç.				
WEST PALM BEACH FL 33417	City Green		ena	cres	FL	Zip Code 33463-3209	
Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited 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.							
SIGNATURE (Registered Agent Accepting Appointment) etterancha C. Carpente, CPA DATE 10/15/98							
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		1b.	City, State & Zip Code	11c.	Registration/ Document Number	
NOBLE MANAGEMENT COMPANY	5821-C LAKE WORTH ROA D		GREE	GREENACRES FL 33463-3みり9		000013479	
				900002 12/23 ****1	/9801	2894 . \$ 075015 *****141.25 . \$	
						V 12	

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

Daytime Telephone Number