

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JAN 22 PM 12:47

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000750

TRADEMARK SERVICES, LTD.



981/27

Mailing Address

1216 OLD HOPEWELL
TAMPA FL 33619

Principal Office Address

1216 OLD HOPEWELL
TAMPA FL 33619

3. Date Formed or Registered

05/15/1995

5a. Capital Contributions as Shown on record

\$140,000.00

3a. Date of Last Report

10/18/1996

5b. Amount of Capital Contributions in FLORIDA to date:

\$140,000.00

4. State or Country of Formation

FL

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

6. FEI Number

59-3243804

Applied For
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

BLEVINS, WILLIAM H
1216 OLD HOPEWELL ROAD
TAMPA FL 33619

10. If changed, new Registered Agent/Office

Name

SAMUEL C. HOPWOOD

Street Address (P.O. Box Number Is Not Acceptable)

1216 OLD HOPEWELL ROAD

Suite, Apt. #, etc.

City

TAMPA

Zip Code

FL 33619

10a. 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)

Samuel C. Hopwood

DATE

12-31-97

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)

TRADEMARK NITROGEN CORP.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

1216 OLD HOPEWELL RD.

11b. City, State & Zip Code

BRANDON FL 33509

11c. Registration/Document Number

G28812

500002417635--1
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***550.00 ***550.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I 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

Don A. Nelson

DATE

12-31-97

Typed or Printed Name of General Partner Signing Form

DON A. NELSON

Daytime Telephone Number

813-676-1181

CR2E003 (6/97)