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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

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

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT#

98 NOV 20 AM 10: 09

Daytime Telephone Number

	A93000000992					11/2	<u> </u>	
WASH ENTERPRISES, LTD.								
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
1725 MAIN STREET FT. MYERS BEACH FL 33931	1725 MAIN STREET FT. MYERS BEACH FL 33931			06/30/1995 3a. Date of Last Report \$400,000.00				
<u></u>			12/09/1997 5b. Amot Control to date		mount of Capital entributions in FLORIDA date:			
2. Mailing Address	2a. Principal Office Address		FL	\$400,000.00				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	Applied For			
City & State	City & State			65-0585508	Not Applicable			
Zip Country	Zip Country			7. Certificate of Status Desired	\$8.75 Additional Fee Required			
				8, Make check payable to: Dept. of S	tate (See reve	rse side for fee informa	tion)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office Name					
TANNENBAUM, MICHAEL D 2161 PALM BEACH LAKES BLVD., SUITE 304 WEST PALM BEACH FL 33409		Street Address (P.O. Box Number is Not Acceptable)						
		Suite, Apt. #, etc12/01/38-01081-010 ****526.25 ****526.25 City FI						
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	med limited partnership organized or registered under the laws of the State of Florida, submits this statement orida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered							
A GENERAL PARTNER THAT I	S A CORPORATION, L BE REGISTERED AN	IMITED	PART	NERSHIP OR OTHER	R BUSII	NESS ENTIT	Y	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner	11b.	City, State & Zip Code	11c.	Registration/ Document Number	\dashv	
SHAW, ANDREW 1725 MAIN STREET			FT. N	NYERS BEACH FL		BOOMS IN THE INTERNATION	(86/8)	
				-7			CR2E003 (8/98)	
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 Corporations from any liability of non-compliance with Se this annual report is true and accurate and that my signa	ection 119.07(3)(k) in the event that the info	rmation suppli	ed is deemer	d exempt from public access, I further or	ertify that the i	nformation indicated or	1	