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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE

Typed or Printed Name of General Partner Signing

1a. DOCUMENT # A9500001087

141-25

DIVISION OF CORPORATIONS

99 JAN -4 AM 8: 10

	A95000001087						
RJE INVESTMENTS, LTD.							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		7
P.O. BOX 21458 ST. PETERSBURG FL 33742	P.O. BOX 21458 ST. PETERSBURG FL 33742			07/18/1995 3a. Date of Last Report 12/31/1997	ate of Last Report		
3	2a. Principal Office Address			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	Za. Principal Office Address			FL	1.00		- {
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 59-3388631	Applied For Not Applicable		
City & State	City & State		===	7. Certificate of Status Desired	\$8.75 Additional Fee Required		\dashv
Zip Country	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				
EDWARDS, JANET L		Name Street Address (P.O. Box Number is Not Acceptable)					_
1381 49TH AVE. NORTHEAST	——————————————————————————————————————		t, #, etc.				
ST. PETERSBURG FL 33703	<u> </u>						
		City			FL	Zip Code	
10a. Pursuant to the provisions of sections 520.1051 and 620.192, Florida Statutes, the above-named limited pertnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its 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)			DATE DATE				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.						MESS ENTIT	
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo	il Partner x Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	_ }
EDWARDS, ROGER L EDWARDS. JANET L	155 5TH AVENUE SOUTH,			ST. PETERSBURG FL 337 ST. PETERSBURG FL 337			E002 (8/08)
			7000027			087 6 1107006	Cal
Note: General partners MAY NOT	be changed on this form	n: an am	endme	****14		****141.65	
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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of							\dashv
12. Too hereby certary that the information supplied with this famility is voluntarily turnished allo does not qualify that the exhibition state in 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.							