FILE ON OR BEFORE DECEMBER 3 WILL BE SUBJECT TO REVOC			P			
A LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			98 DEC 28 AM 8: 13		
1. Name of Limited Partnership	1a. DOCUMENT # A95000001431			SECRETARY OF STATE TALLAHASSEE. FLORIDA		
MONTY'S ON THE BEACH, LTD.						
Mailing Address % PAT BROWN 5901 S.W. 74 STREET, SUITE 408 MIAMI FL 33143	Principal Office Address SUITE 1100 2665 SOUTH BAYSHORE DRIVE MIAMI FL 33133			3. Date Formed or Registered 09/25/1995 3a. Date of Last Report 12/30/1997 4. State or Country of Formation FL	5a. Capital Contributions as Shown on record. \$750,000.00	
2. Mailing Address	2a. Principal Office Address				5b. Amount of Capital Contributions in FLORIDA to date: # 750,000.00	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State			6. FEI Number 65-0608926	Applied For Not Applicable	
Zip Country	Zip Country			7. Certificate of Status Desired 8. Make check payable to: Dept. of S	\$8.75 Additional Fee Required late (See reverse side for fee information)	
9. Name and Address of Current Registered Agent 10. If Changed, new Registered Agent/Office						
O'NAGHTEN, JUAN T 2665 SOUTH BAYSHORE DRIVE SUITE 1100 MIAMI FL 33133		Name				
		Street Address (P.O. Box Number Alot Acceptable)				
10a. Pursuant to the provisions of sections 620,1051 and 62 for the purpose of changing its registered office or regis agent. I am familiar with, and accept the obligations of s	tered agent, or both, in the State of Florida	limited partner		rized by its general partner(s). I hereby	State of Florida, submits this statement	
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 (Do NOT Use Post Office Box	3-d	11b.	City, State & Zip Code	11c. Registration/	
MONTY'S ON THE BEACH, INC.	2665 SOUTH BAYSHORE D		MIAMI FL 33133		P95000073178	
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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

SIGNATURE

DOTON, DOC DATE 12903 11 Daytime Telephone Number 305) 255-0600