

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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # A95000001515
CONGRESS II INVESTORS, LTD.	



Mailing Address 3801 PGA BLVD., STE. 1000 PALM BEACH GARDENS FL 33410	Principal Office Address 3801 PGA BLVD., STE. 1000 PALM BEACH GARDENS FL 33410	3. Date Formed or Registered 10/09/1995	5a. Capital Contributions as Shown on record. \$1,000.00
		3a. Date of Last Report 12/30/1997	5b. Amount of Capital Contributions in FLORIDA to date:
		4. State or Country of Formation FL	
2. Mailing Address Suite, 222 Lakeview Avenue 17th Floor City & West Palm Beach, FL Zip 33401	2a. Principal Office Address Suite, 222 Lakeview Avenue 17th Floor City & West Palm Beach, FL Zip 33401	6. FEI Number <input type="checkbox"/> Applied For 65-0631075 <input checked="" type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> \$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 DASCO DEVELOPMENT CORPORATION 3801 PGA BLVD., STE. 1000 PALM BEACH GARDENS FL 33410	10. If changed, new Registered Agent/Office Name Regserv Corp. Street 222 Lakeview Avenue Suite, 17th Floor City West Palm Beach 33401 FL
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10a. Pursuant to the provisions of sections 620.11 for the purpose of changing its registered office agent. I am familiar with, and accept the obligations under the laws of the State of Florida, submits this statement and hereby accept the appointment of registered general partner(s). I hereby accept the appointment of registered

By: *Patrick J. DiSalvo* **Patrick J. DiSalvo** **Vice President** DATE **12/14/98**

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 Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
CONGRESS II MEDICAL EQUITY I	3801 PGA BLVD., STE. 222 Lakeview Avenue 17 th Floor	PALM BEACH GARDENS FL West Palm Beach, FL 33401	A95000001514

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

SIGNATURE *Patrick J. DiSalvo* DATE **12/14/98**
Patrick J. DiSalvo **Vice President** **564-655-9008**

Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CR2E003 (8/98)