

**FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE**

<p><b>LIMITED PARTNERSHIP ANNUAL REPORT 1999</b></p>		<p align="center">FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS</p>
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
  
99 FEB 16 AM 9: 38

<p><b>1. Name of Limited Partnership</b></p>	<p><b>1a. DOCUMENT #</b> <b>A95000001795</b></p>
<p><b>JERICO GROUP, LTD.</b></p>	



<p><b>2. Mailing Address</b></p>	<p><b>2a. Principal Office Address</b></p>	<p><b>3. Date Formed or Registered</b></p>	<p><b>5a. Capital Contributions as Shown on record</b></p>
<p>3000 N. MILITARY TRAIL BOCA RATON FL 33431-6375</p>	<p>3000 N. MILITARY TRAIL BOCA RATON FL 33431-6375</p>	<p>11/20/1995</p>	<p>\$1,000.00</p>
<p>Suite, Apt. #, etc.</p>	<p>Suite, Apt. #, etc.</p>	<p><b>3a. Date of Last Report</b></p>	<p><b>5b. Amount of Capital Contributions in FLORIDA to date</b></p>
<p>City &amp; State</p>	<p>City &amp; State</p>	<p>12/18/1997</p>	<p></p>
<p>Zip Country</p>	<p>Zip Country</p>	<p><b>4. State or Country of Formation</b></p>	<p><input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable</p>
		<p>FL</p>	<p><b>6. FEI Number</b></p>
			<p>65-0635593</p>
			<p><b>7. Certificate of Status Desired</b></p>
			<p><input type="checkbox"/> \$8.75 Additional Fee Required</p>
			<p><b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b></p>

**9. Name and Address of Current Registered Agent**

**LAWRENCE B. JURAN, P.A.**  
1200 CORPORATE CENTER WAY, SUITE 100  
WELLINGTON FL 33414

**10. If changed, new Registered Agent/Office**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, etc.  
City

900002781159-6  
-02/19/99--01091--012  
\*\*\*\*141.25  
FL

**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) \_\_\_\_\_ DATE \_\_\_\_\_

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

<b>11.</b> Name(s) of General Partner(s)	<b>11a.</b> Address of Each General Partner (Do NOT Use Post Office Box Numbers)	<b>11b.</b> City, State & Zip Code	<b>11c.</b> Registration/Document Number
JERICO GROUP, INC.	3000 N. MILITARY TRAIL	BOCA RATON FL 33431	P95000089036

*CP 2-18*

**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 *Helene Shweert*

DATE 2/11/99

CR2E003 (12/98)