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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



OUTBACK/HEARTLAND-II, LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A95000001819

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			48(It 60(4) 9619((168) 1819) 116(8 184) 1861
Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
550 NORTH REO ST.	550 NORTH REO ST.	11/27/1995	60E 000 00
STE. 200 TAMPA FL 33609	STE. 200	3a. Date of Last Report	- \$25,000.00
TAMER EL 00003	TAMPA FL 33609	12/04/1997	5b. Amount of Capital
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation	Contributions in FLORIDA to date:
		FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6, FEI Number	Applied For
City & State	City & State	59-3346422	Not Applicable
Zip Count	ry Zip Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
	-y Country	0	1 co rrequired

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office	
KADOW, JOSEPH J	Name Street Address (P.O. Box Number is Not Acceptable)	
550 NORTH REO ST.		
STE. 200 TAMPA FL 33609	Suite, Apt. #, etc.	
	City Zip Code	į
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-n for the purpose of changing its registered office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.	named limited partnership organized or registered under the laws of the State of Florida, submits this state Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registe	ement ered

SIGNATURE (Registered Agent Accepting Appointment)

Name(s) of General Partner(s)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE Address of Each General Partner 11. Registration/

11b.

OUTBACK STEAKHOUSE OF FLORID 550 NORTH REO ST., ST TAMPA FL 33609 An suion - 175.00
An suion - 63.75 ****263.75 ****263.75

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11c.

J89475

Document Number

City, State & Zip Code

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 ter 620, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner