FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1998

SYDRAN FOOD SERVICES III, LTD.



FLORIDA DEPARTMENT OF STATE

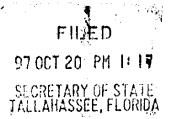
Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

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1. Name of Limited Partnership

DOCUMENT# A95000001961





NO CM		
Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
C/O GRETCHEN RH VOSE 2705 W FAIRBANKS AVENUE	12/15/1995 38. Date of Last Report	\$950.00
WINTER PARK FL 32789 WINTER PARK FL 32789	01/16/1997	5b. Amount of Capital Contributions in FLORIDA to date:
2a. Principal Office Address	4. State or Country of Formation	\$ 950.00
Suite, Apt. #, etc.	6. FEI Number 50-3354560	Applied For
City & State		Not Applicable
Zip Country		\$8.75 Additional Fee Required State (See reverse side for fee information)
	Principel Office Address C/O GRETCHEN RH VOSE 2705 W FAIRBANKS AVENUE WINTER PARK FL 32789 28. Principal Office Address Suite, Apt. #, etc. City & State	Principal Office Address C/O GRETCHEN RH VOSE 2705 W FAIRBANKS AVENUE WINTER PARK FL 32789 28. Principal Office Address Suite, Apt. #, etc. City & State Zip Country 3. Date Formed or Registered 12/15/1995 38. Date of Last Report 01/16/1997 4. State or Country of Formation FL 59-3354569 7. Certificate of Status Desired

	Name			
VOSE, GRETCHEN R.H. 2705 W. FAIRBANKS AVE. WINTER PARK FL 32789	Street Address (P.O. Box Number Is Not Acce	Street Address (P.O. Box Number Is Not Acceptable)		
	Suite, Apt. #, etc.	Suite, Apt. #, etc.		
	Спу	FL Zip Code		
10a. Pursuant to the provisions of sections 620.1051 and 620.192. Flo	rida Statutes, the above-named limited partnership organized or registered und	ler 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) _.

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
SYDRAN III, INC.	C/O GRETCHEN RH VOSE,	WINTER PARK FL 32789	P95000094231
		20000	23271727 279701083014

****156.25 ****156.25

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 acqual report is true and accurate and that my signature shall have the same logal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee report as required by chapter 620, Florida Statutes. empowered to execute !

Typed or Printed Name of General Partner Signing Form

Sydran III, Inc. Dayline Telephone Number 510-328-3300