

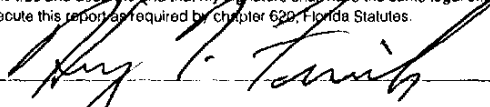


**FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>97 OCT 20 AM 9:34</p> 	
1. Name of Limited Partnership HETAFI GLASS, LTD.		1a. DOCUMENT # A96000000321			
Mailing Address C/O 1665 PALM BEACH LAKES BLVD. STE. 600 WEST PALM BEACH FL 33401		Principal Office Address C/O 1665 PALM BEACH LAKES BLVD. STE. 600 WEST PALM BEACH FL 33401		3. Date Formed or Registered 02/15/1996 3a. Date of Last Report 11/12/1996 4. State or Country of Formation FL	
2. Mailing Address PO Box 527 Suite, Apt. #, etc. City & State ISLE OF PALMS, SC Zip Country 29451-0527		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		5a. Capital Contributions as Shown on record \$133,334.00 5b. Amount of Capital Contributions in FLORIDA to date: <input type="checkbox"/> Applied For <input 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 CHERRY, RICHARD G 1665 PALM BEACH LAKES BLVD. STE. 600 WEST PALM BEACH FL 33401		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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.					
11. Name(s) of General Partner(s) HETAFI GLASS, INC.		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) C/O 1665 PALM BEACH L		11b. City, State & Zip Code WEST PALM BEACH FL 33	
11c. Registration/Document Number P96000014562		100002327211-4 -10/22/97-01092-001 *****541.25 *****541.25			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
12. I 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  DATE 9/25/97					
Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____					

CR2E003 (6/97)