

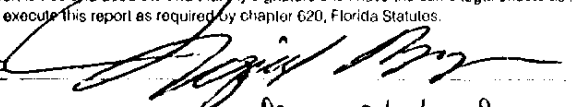


FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

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 DEC 22 AM 9:54 <i>mtu</i> 12/24</p> 	
1. Name of Limited Partnership THE BRYON FAMILY LIMITED PARTNERSHIP, LTD.		1a. DOCUMENT # A96000000542			
Mailing Address 118 N.E. 1ST AVENUE MIAMI FL 33132		Principal Office Address 118 N.E. 1ST AVENUE MIAMI FL 33132		3. Date Formed or Registered 03/20/1996	
2. Mailing Address 145 N.E. 1st street Suite, Apt. #, etc.		2a. Principal Office Address 145 N.E. 1st street Suite, Apt. #, etc.		3a. Date of Last Report 12/17/1996	
City & State Miami FL		City & State Miami FL		4. State or Country of Formation FL	
Zip 33132		Country United States		5a. Capital Contributions as Shown on record \$150,000.00	
5b. Amount of Capital Contributions in FLORIDA to date \$150,000.00		6. FEI Number 65-0725029 APPLIED FOR <input checked="" 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 BYRON, MIGUEL M 118 N.E. 1ST AVENUE - 145 N.E. 1st street MIAMI FL 33132			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) JEWELTECH INTERNATIONAL, INC		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 118 N.E. 1ST AVENUE 145 N.E. 1st street		11b. City, State & Zip Code MIAMI FL 33132	
11c. Registration/Document Number P96000017656		200002384232--9 -12/29/97--01054--008 ****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 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 		DATE 12-18-97			
Typed or Printed Name of General Partner Signing Form Miguel L. Bryon		Daytime Telephone Number (305) 379-7161			

CR2E003 (6/97)