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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #

## FILED

98 DEC 29 AM 10: 41

SECRETARY OF STATE

	A96000000715			TALLAHASSEE, FLORIDA			
DEMAR ENTERPRISES LTD.							
Mailing Address 2665 SOUTH BAYSHORE DRIVE	Principal Office Address  2665 SOUTH BAYSHORE DRIVE SUITE 703 MIAMI FL 33133			3. Date Formed or Registered 04/12/1996	52. Capital Contributions as Shown on record.  \$7,950,000.00  5b. Amount of Capital Contributions in FLORIDA to date:		
SUITE 703 MIAMI FL 33133				3a. Date of Last Report 12/22/1997			-
2. Mailing Address				4. State or Country of Formation			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. FEI Number 65-0684796	Applied For Not Applicable		
City & State	City & State  Zip Country			7. Certificate of Status Desired	\$8.75 Additional Fee Required		
Zip Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current	Registered Agent	Name		10. If changed, new Registered	I Agent/Office		$\exists$
RICHARDS, TIMOTHY D ESQ. 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI FL 33131		World Corporate Services, Inc.  Street Address (P.O. Box Number Is Not Acceptable)  2665: South Bayshore Drive Sulte, Apt. #, etc.  Sujte 703  City  Miami  FL 33133				Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	egistered agent, or both, in the State of Flo	ed limited partning. Such chang	ership organize ge was authoriz	ed by its general partner(s). I hereb	State of Florid y accept the ap	pointment of registered	
A GENERAL PARTNER THAT	IS A CORPORATION, I BE REGISTERED AN	LIMITED	PARTN VE WITH	ERSHIP OR OTHE			7
11. Name(s) of General Partner(s)	11a. Address of Each Gene		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
STATON OPERATIONS, INC.		2665 SOUTH BAYSHORE D		MIAMI FL 33133		F96000001832	
<b>.</b>				5000027 -01/21/ ****53	7505 790-01 85.00	8155 097017 ****\$35.00	3
Note: General partners MAY NOT	be changed on this for	m; an am	endmen	t must be filed to cha	ange a ge	eneral partner.	-
12. I do hereby certify that the information supplied with the Corporations from any liability of non-compliance with this annual report is true and accurate and that my sign empowered to execute this report as required by chap.	is filing is voluntarily furnished and does n Section 119,97(3)(k) in the event that the i nature shall have the same legal effects as	ot qualify for the	exemption stat	ed in Section 119.07(3)(k), Florida S exempt from public access. I further	tatutes. I releas certify that the	e the Division of Information indicated on	
SIGNATURE	MARA				<del>2-53-</del>	78	_
Timed or Drieted Name of Connect Bactery Steeling Form	Albert H. Staton Jr	. Pres	ident.	Staton Operation	s, Inc	-09/17	ĺ