## FILE ON OR BEFORE APRIL 8,1998 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



RALPH

PELTA TR

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

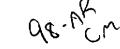
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE \_

1a. DOCUMENT # **A9600000915** 

R & M PARTNERSHIP, LTD.





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SECRETARY OF STATE



|   | , ,   | •                                    |                  |   |   |   |  |
|---|---|--------------------------------------|------------------|---|---|---|--|
| Asiling Address 5402 W. FLAGLER STREET MIAMI FL 33134   | Principal Office Address  ET 5402 W. FLAGLER STREET  MIAMI FL 33134                             |                                      |                  | 3, Date Formed or Registered<br>05/15/1996<br>3a. Date of Last Report<br>01/15/1997 |   | 5a. Capital Contributions as Shown on record. \$10,000.00 |  |
| 2. Malling Address  | 28. Principal Office Address  |                                      |                  | 4. State or Country of Formation  | 5b. Amount of Capital<br>Contributions in FLORIDA<br>to date:                                 |   |  |
| Suite, Apt. #, etc.   | Suite, Apt. #, etc.   |                                      |                  | 6. FEI Number 45-0756947 Applied For  |   |   |  |
| City & State  | City & State  |                                      |                  | 7. Certificate of Status Desired  | INOT Applicable Is Desired \$8.75 Additional  |   |  |
| Zip Country   | Zip   | Zip Country                          |                  |   | Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information) |   |  |
| 9. Name and Address of Curren   | t Registered Agent  | <del></del>                          |                  | 10. If changed, new Registere   | d Agent/Office  |   |  |
| PENA, RALPH JR. 5402 W. FLAGLER STREET  | Name  Streel Address (P.O. Box Number la Nol.Acceptable)  |                                      |                  |   |   |   |  |
| MIAMI FL 33134  | Suite, Apt. #, etc03/19/980100300/4 ****173.75 ****173.75 City FL Zip Code                      |                                      |                  |   |   |   |  |
| agent. I am familiar with, and accept the obligation  GRATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT  |   | LIMITED                              | PARTI            | DATE NERSHIP OR OTHE  |   | NESS ENTITY   |  |
| 11. Name(s) of General Partner(s)   | 11a. (Do NOT Use Post Office Box Numbers)   |                                      | 11b.             | City, State & Zip Code  | 11c.  | Registration/<br>Document Number                          |  |
| ANEP, INC.  | 5402 W. FLAGLER STREE   |                                      | MIAMI FL 33134   |   | P95000060283  |   |  |
| GDM PROPERTY INVESTMENT, INC  | 613 EAST 49 STREET  |                                      | HIALEAH FL 33013 |   | P95000075454  |   |  |
|   |   |                                      |                  |   |   |   |  |
| Note: General partners MAY NOT  |   |                                      |                  |   |   |   |  |
| <ol> <li>Poo hereby certify that the information supplied with<br/>Corporations from any liability of non-compliance wit<br/>this annual report is true and accurate and that my s</li> </ol> | this filing is voluntarily turnished and does r<br>h Section 119.07(3)(k) in the event that the | not qualify for the information supp | exemption (      | stated in Section 119.07(3)(k), Florida<br>and exempt from public access. I furth   | Statutes. I releaser certify that the   | ase the Division of<br>ne information indica              |  |