

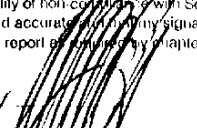


FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 JAN -2 AM 10: 03	
1. Name of Limited Partnership <b>UNIVERSAL TRANSFER SERVICES, LTD.</b>		1a. DOCUMENT # <b>A96000001073</b>			
Mailing Address <b>532 NW 77th ST. 17556 LAKE ESTATES DRIVE BOCA RATON FL 33487</b>		Principal Office Address <b>17556 LAKE ESTATES DRIVE 17556 LAKE ESTATES DRIVE BOCA RATON FL 33496 BOCA RATON FL 33496</b>		3. Date Formed or Registered <b>06/06/1996</b>	
2. Mailing Address <b>532 NW 77th ST.</b>		2a. Principal Office Address <b>17556 LAKE ESTATES DRIVE 532 NW 77th ST</b>		3a. Date of Last Report <b>05/05/1997</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation <b>FL</b>	
City, State <b>Boca Raton, FL</b>		City, State <b>Boca Raton FL</b>		6. FEI Number <b>65-0684035</b>	
Zip <b>33487</b>		Zip <b>33496</b>		7. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Country <b>USA</b>		Country <b>USA</b>		8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent <b>BREGMAN, HOWARD E ESQ GREENBERG, TRAUBIG, HOFFMAN, ET. AL. 777 S. FLAGLER DRIVE, SUITE 310-EAST WEST PALM BEACH FL 33401</b>				10. If changed, now Registered Agent/Office Name <b>3000002405533-4</b> Street Address (P.O. Box Number Is Not Acceptable) <b>01/20/98-01143-009</b> Suite, Apt. #, etc. <b>****156.25 ****156.25</b> City <b>FL</b> 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 _____					
<b>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b>					
11. Name(s) of General Partner(s) <b>UNIVERSAL TRANSFER SERVICES, Ltd.</b>		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>17556 LAKE ESTATES DR 17556 LAKE ESTATES DR 17556 LAKE ESTATES DR</b>		11b. City, State & Zip Code <b>WEST PALM BEACH FL 33401 BOCA RATON, FL 33496</b>	
				11c. Registration/Document Number <b>P98000044142</b>	
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. 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 		Partner <b>Elliot J. Broady</b>		DATE <b>12/29/97</b>	
Typed or Printed Name of General Partner on this form		Daytime Telephone Number		<b>561/988-1125</b>	

CP2E003 (6/97)