

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 MAR 16 AM 10:14



1. Name of Limited Partnership	1a. DOCUMENT # A96000001193
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COLOR ME MINE FLORIDA 103J, LTD.

Mailing Address 10800 BISCAYNE BLVD., PENTHOUSE-OK MIAMI FL 33161	Principal Office Address 10800 BISCAYNE BLVD., PENTHOUSE-OK MIAMI FL 33161	3. Date Formed or Registered 06/25/1996	5a. Capital Contributions as Shown on record. \$10,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report 04/09/1997	5b. Amount of Capital Contributions in FLORIDA to date: 10,000
Suite, Apt. #, etc. 8720 705	Suite, Apt. #, etc. 8720 705	4. State or Country of Formation FL	6. FEI Number 65-0698749
City & State	City & State	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)
Zip Country	Zip Country		

9. Name and Address of Current Registered Agent RYAN, NANCY 10800 BISCAYNE BLVD., PENTHOUSE MIAMI FL 33161	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number) Suite, Apt. #, etc. City Zip Code
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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) CMM FLORIDA 103J, L.C.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 10800 BISCAYNE BLVD.,	11b. City, State & Zip Code MIAMI FL 33161	11c. Registration/Document Number L96000000691
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**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 Color Me Mine Florida 103J, LTD. & CMM Florida 103J, L.C., General Partner by Color Me Mine, Inc., Managing Agent DATE 10-21-97  
By Alup 2 CFU  
Typed or Printed Name of General Partner Signing Form \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

CR2E003 (6/97)