FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

CBG BIOTECH, LTD.

1a. DOCUMENT # **A9600001439**

FILED

96 DEC -9 AM 11:50

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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P.O. BOX 99826 SOLON OH 44139	Principal Office Address 6371 PELICAN BAY BLVD SUITE N-5 NAPLES FL 34108		3. Date Formed or Registered 08/01/1996 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$1,000.00 5b. Amount of Capital Contributions in FLORIDA delay.	
2. Mailing Address 39370	2a. Principal Office Address	2a. Principal Office Address		to dat	e: —
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		_L	Applied For Not Applicable
City & State	City & State		7. Certificate of Status Desired		
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information of the content	
9. Name and Address	of Current Registered Agent		10. If changed, new Registers	ed Agent/Office	
BURKE, WILLIAM M ESQ. C/O BOND, SCHOENECK & KING, P.A. 1167 THIRD STREET SOUTH, SUITE 107 NAPLES FL 33940		Name			
		Street Address (P.O. Box Number Is Not Acceptable) Suite. Apt. #, etc.			
		City Zip Code			
		Florioa, Such change v	vas authorized by its general partner(s). I he		
agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo	e obligations of section 620.192, Florida Statutes. Intiment) THAT IS A CORPORATION	, LIMITED P	vas authorized by its general partner(s). The DATE ARTNERSHIP OR OTHE	reby accept the	appointment of registere
agent Tam familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo	e obligations of section 620.192, Florida Statutes. Intiment) THAT IS A CORPORATION MUST BE REGISTERED A	, LIMITED PA	vas authorized by its general partner(s). The DATE ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSI	NESS ENTITY
agent Tam familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo	e obligations of section 620.192, Florida Statutes. Intiment) THAT IS A CORPORATION	, LIMITED PA	vas authorized by its general partner(s). The DATE ARTNERSHIP OR OTHE	reby accept the	appointment of registere
agent Tam familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo	e obligations of section 620.192, Florida Statutes. Intiment) THAT IS A CORPORATION MUST BE REGISTERED A	, LIMITED PA ND ACTIVE Neral Partner 8 Box Numbers) 1	DATE ARTNERSHIP OR OTHE WITH THIS OFFICE. 1b. City. State & Zip Code NAPLES FL 34108	ER BUSI	NESS ENTITY Registration/ Document Number 95000050031
agent I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo A GENERAL PARTNER 11. Name(s) of General Partner(s)	THAT IS A CORPORATION MUST BE REGISTERED A 11a. (Do NOT Use Post Office 6371 PELICAN BAY I	, LIMITED PA ND ACTIVE Neral Partner 8 Box Numbers) 1	DATE ARTNERSHIP OR OTHE WITH THIS OFFICE. 1b. City. State & Zip Code	ER BUSI	NESS ENTITY Registration/ Document Number 95000050031

Corporations from any hability 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