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 # A9600001501

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 22 AM 9:31

COOPER FAMILY LIMITED PARTNERSHIP							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capit	al Contributions as n on record.	_
2801 N.W. 55TH COURT. BUILDING 6-E	2801 N.W. 55TH COURT. BUILDING 6-E FT. LAUDERDALE FL 33309			08/12/1996	\$10,000.00		
FT. LAUDERDALE FL 33309				3a. Date of Last Report 12/31/1997			
				4. State or Country of Formation	int of Capital ibutions in FLORIDA e:		
2. Mailing Address	2a. Principal Office Address			FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number		Applied For	1
City & State	City & State			65-0701913 7. Certificate of Status Desired	Not Applicable		4
Zip Country	Zíp Country				Desired \$8.75 Additional Fee Required a to: Dept. of State (See reverse side for fee Information)		
The stock payers to sope of some forest and for the minimaxin							_
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office					\exists
MOYLE, BERNARD T ESQ.		Street Address (P.O. Box Number Is Not Acceptable)					_
C/O BENSON, MOYLE AND CHAMBERS							
ONE FINANCIAL PLAZA, SUITE 1600 FT. LAUDERDALE FL 33309		Sulte, Apt. #, etc.					
11. Litobeliante 16 00000		City FL Zip Code					7
10a. Pursuant to the provisions of sections 620.1951 and 620.1952, 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)	Address of Each General (Do NOT Use Post Office Box		11b.	City, State & Zip Code	11c.	Registration/ Document Number	_
ROYCON HOLDINGS, INC.	2801 N.W. 55TH COURT,		FT. LAUDERDALE FL 333		P96000065157		(8/98)
			700002 ⁻ -01/15/ ****15		10:00 LP		CR2E003 (8/98)
					/ 9 901015020		
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							
Typed or Printed Name of General Partner Signing Form Coxstads = L. Confer Daytime Telephone Number (954) 7.31-1064							