FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997

SIGNATURE . COMMUNICATION

Typed or Printed Name of General Partner Signing Form Laurence SJ. Pagano



FLORIDA DEPARTMENT OF STATE Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

97 MAR 28 PM 3: 18



	A96000001767				
SCALE TRADERS, LTD.			1 1991/511 1810 181/5 81/11 001/11	ATII ABIIK ADIIK ADIAN KEBII 1801A SIKKI 1804 1864	
Mailing Address Principal Office Address 8578 CRESCENT LAKE DRIVE. SUITE 201 9578 CRESCENT LAKE I NAPLES FL 34109 NAPLES FL 34109		DRIVE. SUITE 201	3. Date Formed or Registered 09/24/1996 38. Date of Last Report	5a. Capital Contributions as Shown on record.	
				5b, Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date.	
5811 Pelican Bay Blvd	5811 Pelican Bay Blvd		vd		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
Suite 205 City & State	Suite 205 City & State			Not Applicable	
Naples, FL Country	Naples, FL	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
34108 USA	34108	USA	8. Make check payable to: Dept. of	8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
PAGANO, LAURENCE J		Name	ame		
·		Paga	Pagano Laurence J Street Address (P.O. Box Number is Not Acceptable)		
9578 CRESCENT LAKE DRIVE, SUITE 201		5811	5811 Pelican Bay Blvd.		
NAPLES FL 34109		Suite, Apt.	Suite, Apt. *, etc. Suite 205		
	City		e 205	Zip Code	
		Nap1		FL 34108	
10a. Pursuant to the provisions of sections 620,1051 an the purpose of changing its registered office or regi I am familiar with, and accept the obligations of sec	Istered agent, or both, in the State				
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
A GENERAL PARTNER THAT MUS	IS A CORPORATI T BE REGISTERE	ON, LIMITED D AND ACTI	PARTNERSHIP OR OTHE VE WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Eac (Do NOT Use Post	ch General Partner t Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
THE BEACON COMPANIES, INC. 9578 CRESCENT LAK			NAPLES FL 34109	P95000086746	
				P95000066746	
			400002 -04/01 *****5	1296849 /9701024021 41.25 ****\$41.25	
Note: General partners MAY NOT	be changed on thi	s form; an am	endment must be filed to ch	ange a general partner.	
12. I do hereby certify that the information supplied with t Corporations from any liability of non-compliance with annual report is true and accurate and that my signat	h Section 119.07(3)(k) In the event	that the information supp	lied is deemed exempt from public access. I furthe	er certify that the information indicated on this	