

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

LIMITED PARTNERSHIP ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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1. Name of Limited Partnership	1a. DOCUMENT # A96000002066
SPOTLIGHT BUSINESS TELEVISION, LTD.	

Mailing Address 1975 E. Sunrise Blvd. Suite 503 Sunrise, FL 33304	Principal Office Address 1975 E. Sunrise Blvd. Suite 503 Sunrise, FL 33304
2. Mailing Address	2a. Principal Office Address
1975 E. Sunrise Blvd.	1975 E. Sunrise Blvd.
Suite, Apt. #, etc. Suite 503	Suite, Apt. #, etc. Suite 503
City & State Sunrise, FL	City & State Sunrise, FL
Zip Country 33304 USA	Zip Country 33304 USA

3. Date Formed or Registered 11/7/96	5a. Capital Contributions as Shown on record \$19,800.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date: \$19,800.00
4. State or Country of Formation Florida	
6. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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)	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
David Powers 7777 Glades Road Suite 300 Boca Raton, FL 33434	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, etc.
	City
	FL 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 \_\_\_\_\_

**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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
Spotlight Television, Inc.	1975 E. Sunrise Blvd Suite 503	Sunrise, FL 33304	P96000092054

100002050251--3  
-01/08/97--01039--006  
\*\*\*\*277.35 \*\*\*\*277.35

CR2E003 (6/96)

**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 By: SPOTLIGHT TELEVISION, INC. DATE 12/27/96  
Tim T. Byrne, President Daytime Telephone Number (954) 467-6100