LIMITED PARTNERSHIP ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

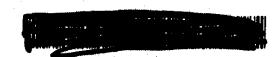
Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

LIME STREET, LTD.

DOCUMENT #

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				-				
Mailing Address C/O THE ALLEN MORRIS COMPANY 1000.BRICKELL AVE. #300 MIAMI FL 33131		Principal Office Address C/O THE ALLEN MORRIS COMI 1000.BRICKELL AVE. #300 MIAMI FL 33131	C/O THE ALLEN MORRIS COMPANY 1000.BRICKELL AVE. #300		3. Date Formed or Registered 11/15/96 38. Date of Last Report	58. Capital Contributions as Shown on record.		
					4. State or Country of Formation	to de		
2. Mailing Address		2a. Principal Office Address	2a. Principal Office Address		FL		\$1,000.00	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number Applied For 65-0715318 Applied For Not Applied For			
City & State		City & State	City & State		7. Certificate of Status Desired \$8.75 Additions			
Zip Country		Zip	Zip Country		Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information			
	· · · · · · · · · · · · · · · · · · ·				O, mand oneck payable to. Dupt. o		your good not too many make my	
9. Name and Address of Current Registered Agent				10. If changed, new Registered Agent/Office				
HARLESTON R. WOOD			Name					
1000 BROCK	KELL AVE.		Street Address IP 6		O Box bumher is Not Acceptable)			
SUITE 300			Suite Com a reserving					
MIAMI FL 33	3131		C.		. Zio Code			
			-City			FL	Zio Code	
for the purp agent. I am	pose of changing its registered office	and 620.192. Florida Statutes, the above-name or registere flagent, or both, in the State of Fittins of action 620.193 Florida Statutes.	ned limited partne orida. Such chan	ership organ nge was aut	ized or registered under the laws of the provided by its general partner(s). I her	he State of Flo eby accept th	rida, submits this statement e appointment of registered	
A GENER		IT IS A CORPORATION, ST BE REGISTERED AN				R BUS	INESS ENTITY	
11. Name(s)	of General Partner(s)	11a. (Do NOT Use Post Office	rai Partner Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
HAMMOND VENTURE, INC.		1000 BRICKELL AVE.,	1000 BRICKELL AVE., #		MIAMI FL		P16775	
				•	1000020 -01/23 ****1	0 55: /87-0 91 25	9917 1051001 ****191.25	
1	•						KWM	
		OT be changed on this for					·	
12. I do hereby o	certify that the information supplied v	rith this filing is voluntarily furnished and does	not qualify for the	exemption	stated in Section 119.07(3)(k), Florida	a Statutes. I re	lease the Division of	