

**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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 JAN 27 PM 1:36

1. Name of Limited Partnership Boca Hospitality, Ltd. 1455 Yamato Road Boca Raton FL 33431		1a. DOCUMENT # A96000002292	
2. Mailing Address c/o J. Hahn CPA 1515 N. Federal Hwy Boca Raton, FL 33432		2a. Principal Office Address 1455 Yamato Road Boca Raton, FL 33431	
3. Date Formed or Registered Dec. 12, 1996		5a. Capital Contributions as Shown on record \$50,000	
3a. Date of Last Report		5b. Amount of Capital Contributions in FLORIDA to date: \$50,000	
4. State or Country of Formation FLA.		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) \$488.75	

9. Name and Address of Current Registered Agent DANIEL LEGGETT CSC NETWORKS TALLAHASSEE, FLA.		10. If changed, new Registered Agent/Office Name JEFFREY HAHN CPA Street Address (P.O. Box Number is Not Acceptable) 1515 NORTH FEDERAL HWY. Suite, Apt. #, etc. SUITE 300 City BOCA RATON FL Zip Code 33432	
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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) **John B. Clark**

DATE **1/23/97**

**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) Boca Hospitality, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1455 Yamato Rd.	11b. City, State & Zip Code Boca Raton, FL 33431	11c. Registration/Document Number P95000021707 700002076177--4 -02/03/97--01068--002 ****488.75 ****488.75 KWM
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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

Patricia Guarini

DATE

1/24/97

Typed or Printed Name of General Partner Signing Form

PATRICK GUARINI

Daytime Telephone Number

561-988-0200

CR2E003 (6/96)