## 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

**DOCUMENT#** A97000000294

SECTO A REPORT STATE DIVISION OF LORGINATIONS

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EUSTIS MARKETPLACE, LTD.				1 HONETH FOLD IN HERDIN BONIN BETTI BONIN		
Mailing Address  200 WEST PALMETTO PARK ROAD. SUITE 301 BOCA RATON FL 33432		Principal Office Address  200 WEST PALMETTO PARK ROAD. SUITE 301 BOCA RATON FL 33432		3, Date Formed or Registered 01/28/1997 3a. Date of Last Report 09/17/1997 4. State or Country of Formation	5a, Capital Contributions as Shown on record. \$693,000.00  5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address		2a. Principal Office Address		FL		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number 61-073	Applied For Not Applicable	
City & State	·	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip 	Country	Zip	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information)	
	9. Name and Address of Curre	nt Registered Agent	10. If changed, new Registered Agent/Office			
•	rc L esquire Th Bayshore Drive, 7th Fli	00R	Name Street Address (P.O. Box Number Is Not Acceptable)			
MIAMI FL 33133			Suite, Apt. #, etc.			
			City		FL Zip S	
for the pr		registered agent, or both, in the State		organized or registered under the laws of the authorized by its general partner(s). I hereb		
	pistered Agent Accepting Appointment)			DATE		
A GENE		TIS A CORPORATIO ST BE REGISTERED		RTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	

11b.

City, State & Zip Code

**BOCA RATON FL 33432** 

Address of Each General Partner

11a. (Do NOT Use Post Office Box Numbers)

200 WEST PALMETTO PAR

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 \_

11.

Name(s) of General Partner(s)

EUSTIS MARKETPLACE, INC.

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number 161-368-2043

Registration/

P97000006796

11c.