
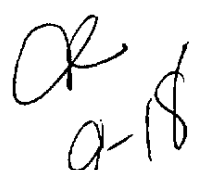


FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 97 SEP 18 PM 2:57 	
1. Name of Limited Partnership M&D DOUGLAS INTERNATIONAL PARTNERSHIP, LTD.		1a. DOCUMENT # A97000000388			
Mailing Address %DOUGLAS ENTERPRISES INTERNATIONAL L.L.C. 1257 EAST BAYA AVENUE LAKE CITY FL 32055		Principal Office Address %DOUGLAS ENTERPRISES INTERNATIONAL L.L.C. 1257 EAST BAYA AVENUE LAKE CITY FL 32055		3. Date Formed or Registered 02/13/1997 3a. Date of Last Report N/A 4. State or Country of Formation FL	
2. Mailing Address 86 N 5TH Street Suite #2 Lake City, FL Zip 32055 Country USA		2a. Principal Office Address 86 N 5TH Street Suite #2 Lake City, FL Zip 32055 Country USA		5a. Capital Contributions as Shown on record \$2,000,000.00 5b. Amount of Capital Contributions in FLORIDA to date: 2,000,100.00 6. FEI Number 59-341-8019 <input type="checkbox"/> Applied For <input checked="" 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 COLEMAN, C. RANDOLPH 9250 BAYMEADOWS ROAD, SUITE 230 JACKSONVILLE FL 32218				10. If changed, new Registered Agent/Office Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ Suite, Apt. #, etc. _____ City _____ State 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) DOUGLAS ENTERPRISES INTERNAT		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1257 EAST BAYA AVENUE		11b. City, State & Zip Code LAKE CITY FL 32055	
11c. Registration/Document Number L97000000178 <div style="text-align: right;">  300002299883--2 -09/22/97--01124--023 ****541.25 ****541.25 </div>					
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 		DATE 9/10/97 Typed or Printed Name of General Partner Signing Form Diana S. Douglas Daytime Telephone Number (914) 752-6244			

CR2E003 (6/97)