

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

98 JAN 21 AM 11:56 # 126

1. Name of Limited Partnership

1a. DOCUMENT #  
**A97000000481**

**RES HOLDINGS, LTD.**



Mailing Address

Principal Office Address

**3400 NORTH OCEAN BLVD.  
FORT LAUDERDALE FL 33308**

**3400 NORTH OCEAN BLVD.  
FORT LAUDERDALE FL 33308**

3. Date Formed or Registered

**02/25/1997**

5a. Capital Contributions as  
Shown on record.

**\$100.00**

3a. Date of Last Report

5b. Amount of Capital  
Contributions in FLORIDA  
to date

4. State or Country of Formation

**FL**

2. Mailing Address

2a. Principal Office Address

**3400 NE 34th Street**

**3400 NE 34th Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**101**

**101**

City & State

City & State

**Ft. Lauderdale, FL**

**Ft. Lauderdale, FL**

Zip Country

Zip Country

**33308 USA**

**33308 USA**

6. FEI Number

**65-0727375**

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ **\$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

**SAMMOUNT, INC.  
3100 NORTH OCEAN BLVD.  
FORT LAUDERDALE FL 33308**

Name

**SAMMOUNT, INC.**

Street Address (P.O. Box Number Is Not Acceptable)

**3400 NE 34th Street**

Suite, Apt. #, etc.

**Suite 101**

City

**Ft. Lauderdale**

**FL**

Zip Code

**33308**

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

**SAMMOUNT, INC.**

**3100 NORTH OCEAN BLVD  
3400 NE 34 ST #101**

**FORT LAUDERDALE FL 33308**

**P97000001450**

**700002413597--5  
-01/27/98--01095--011  
\*\*\*\*141.25 \*\*\*\*141.25**

**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 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.

**SAMMOUNT, INC.**

SIGNATURE

By:

DATE **12/10/97**

**Sam Richter**

Daytime Telephone Number **514-568-4118**

Typed or Printed Name of General Partner Signing Form

CR2E003 (6/97)