FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

12. I do hereby certify that the information supplied will Corporations from any liability of non-complient this annual report is true and accurate and that empowered to execute this report as require

Typed or Printed Name of General Partner Signing Form

SIGNATURE __By:

SAMMOUNT

20, Florida Statutes,

Sam Richter, President



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOOLINAENT 4

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC -7 AMII: 38

Name of Limited Partnership	A9700000048	31#		
RES HOLDINGS, LTD.				
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
3400 NE 34TH ST. SUITE 101 FT LAUDERDALE FL 33308	3400 NE 34TH ST. SUITE 101 FT LAUDERDALE FL 33308		02/25/1997 3a. Date of Last Report 01/21/1998	\$100.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0727375	Applied For Not Applicable
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	Zip Cou.	ntry	8. Make check payable to: Dept. of S	Fee Required tate (See reverse side for fee information)
0 1			10. If changed, new Registered	Apont/OST-
9. Name and Address of Current Registered Agent Name		ame	IV. if changed, new Registered	AgentiOnice
SAMMOUNT, INC.	Street Address (P.O. E		Box Number Is Not Acceptable)	
3400 NE 34TH ST, SUITE 101	Suite, Apt. #, etc.			
FT LAUDERDALE FL 33308				
	Ci	ty	,	FL Zip Code
10a. Pursuant to the provisions of sections 620.1051 and 62 for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of	stered agent, or both, in the State of Florida. St			
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)	Address of Each General Part (Do NOT Use Post Office Box Nur	ner 11b.	City, State & Zip Code	11c. Registration/ Document Number
SAMMOUNT, INC.	3400 NE 34TH ST, SUITE 1	01 FT	LAUDERDALE FL 3330 8	P97000001450
			5000027 -12/10/5 ****15	095459 801097010 0.00 ****150.00
Note: General partners MAY NOT b	e changed on this form: a	n amendm	ent must be filed to cha	nge a general partner

ng)s voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of in 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 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

12/1/98

DATE_

Daytime Telephone Number_