


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

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| LIMITED PARTNERSHIP ANNUAL REPORT 1999 | |  | FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS |
| 1. Name of Limited Partnership | | 1a. DOCUMENT # A97000000848 | |
| CARNIC - CLARKE LIMITED PARTNERSHIP | | | |
| Mailing Address 6181A PINE TREE LANE TAMARAC FL 33319 | | Principal Office Address 6181A PINE TREE LANE TAMARAC FL 33319 | |
| 2. Mailing Address 4846 N. UNIVERSITY DR SUITE, Apt. #, etc. BOX 305 LAUDERHILL FL 33351-4510 USA | | 2a. Principal Office Address 4846 N. UNIVERSITY DR SUITE, Apt. #, etc. LAUDERHILL FL USA 33351-4510 | |
| 3. Date Formed or Registered 04/14/1997 | | 5a. Capital Contributions as Shown on record \$2,000.00 | |
| 3a. Date of Last Report 02/16/1998 | | 5b. Amount of Capital Contributions in FLORIDA to date: | |
| 4. State or Country of Formation FL | | 6. FEI Number 65-074 APPLIED FOR 2283 <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) | |

FILED

99 FEB 22 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



| | | | |
|---|--|--|---------------------------------------|
| 9. Name and Address of Current Registered Agent NICHOLAS, CARMEN A 6181A PINE TREE LANE TAMARAC FL 33319 | | 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City | |
| 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. | | DATE 02/24/99 01066-001 ****141. FL ****141.25 | |
| 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 |
| NICHOLAS, CARMEN A CLARKE, C. BILISTON | 6181A PINE TREE LANE 9734 CYPRESS SHADOW A | TAMARAC FL 33319 TAMPA FL 33647 | AL FEB 22 1999 |

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

Carmen A. Nicholas

DATE

11/17/98

Typed or Printed Name of General Partner Signing Form

CARMEN A. NICHOLAS

Daytime Telephone Number

561-223-1611

CR2E003 (8/98)