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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

PATE RESTAURANT ENTERPRISES, LTD.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # Ä97000000861

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN -2 AM 10: 02



Mailing Address	Principal Office Address		<b>3.</b> D	3. Date Formed or Registered		<b>5a.</b> Capital Contributions as Shown on record	
2106 N.W. 67TH PLACE, SUITE 15			04	04/18/1997 3a. Date of Lest Report		\$990.00  5b. Amount of Capital Contributions in FLORIDA	
GAINESVILLE FL 32653			За.				
2. Mailing Address	2a. Principal Office Address		4. st	4. State or Country of Formation		to date:	
Z. Maning Address	Ed. Trincipal Onice Address		FL	FL		990.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			.I Number	Applied For		
City & State	City & State		<u> </u>			Not Applicable	
Zip Country	7 in	Zip Country		ortificate 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	10. If changed, new Registered Agent/Office			
PATE, CHARLES R				400002405524: -2			
2108 N.W. 67TH PLACE, SUITE 15			Street Address (P.O. Box Number Is Not Acceptable) 1 / 20 / 38 (11143 005				
·		Suite, Apt. #	s. #. etc. ****156, 25 ****156, 25				
	Cily		<del></del>	FL Zip Code			
10a. Pursuant to the provisions of acctions 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). Hereby accept the appointment of registered agent if am familiar with, and accept the obligations of section 620 192. Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment).							
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. (Do NOT Use Post Office Box Numbers)		<b>11b.</b> 0	<b>b.</b> City, State & Zip Code		11c. Registration/ Document Number	
PATE RESTAURANT GROUP, INC.	2106 N.W. 67TH PLACE,		GAINESVILLE FL 32653		P96000103281		
•	,				A	110	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.							

12. It do heroby 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. Frelease the Division of

Corporations from any liability of non-compliance with Section 119,07(3)(k) in the event that the information supplied is doomed exempt from public access. I further certify that the information indicated on this annual report is true and accurate any flust my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the finited partnership, receiver or trustee empowered to execute this report as a fulfied by change 629. Horida Statutes.

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

Charles R Parte

DATE 12/30/97 Daytinic Telephono Number 352/377-3700