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

LIMITED PARTNERSHIP ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 22 PM 1:49

1. Name of Limited Partnership	^{1a.} DOCUM A97000001	ENT # 499	<u> </u>			1/8	
HRM, LTD.						*****	
Mailing Address	Principal Office Address	Principal Office Address		Formed or Registered	5a. Capit	al Contributions as	
C/O HRM DEVELOPMENT CORP. 2650 N.W. 23RD WAY BOCA RATON FL 33431	2650 N.W. 23RD WAY BOCA RATON FL 33431			07/07/1997 3a. Date of Last Report 12/24/1997 4. State or Country of Formation FL		5a. Capital Contributions as Shown on record. \$10,000.00 5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Number 0771:182	<u> </u>	Applied For	
City & State	City & State	City & State Zlp Country		ficate of Status Desired		Not Applicable \$8.75 Additional	
Zip Country	Zip			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				
HEAD, THOMAS A 2650 N.W. 23RD WAY BOCA RATON FL 33431			Name Street Address (P.O. Box Number Is Not Acceptable) Suită, Apt. #, etc.				
		City FL Zip Code					
10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered offic agent. I am familiar with, and accept the obliging	e or registered agent, or both, in the State of Floric	d limited partne la. Such chang	ership organized or reg ge was authorized by it	istered under the laws of the s general partner(s). I hereby	State of Florid	a, submits this statement pointment of registered	
SIGNATURE (Registered Agent Accepting Appointment		12.21		DATE_			
A GENERAL PARTNER TH	AT IS A CORPORATION, L UST BE REGISTERED AN	IMITED D ACTIV	PARTNERS VE WITH TH	SHIP OR OTHEI IS OFFICE.	R BUSII	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner x Numbers)	11b. City,	State & Zip Code	11c.	Registration/ Document Number	
HRM DEVELOPMENT CORP.			BOCA RATON FL 33431		P97000058789		
				300002 ⁻ -01/12/ ****15	7387 799-01 8.75	223——0 065—026 ****158.75	
Note: General partners MAY N						<u>_</u>	
12. I do hereby certify that the information supplied w	rith this filing is voluntarily furnished and does not o	qualify for the	exemption stated in Ser	ction 119.07(3)(k), Florida Sta	itutes. I releas	e the Division of	

Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied to descend results and the same legal effects as if made under eath. 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.

SI	GN/	JTA	IRE	Ē_



Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number