


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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership NDK, Limited Partnership		1a. DOCUMENT # A97000001915	
Mailing Address 154 San Marco Ave. St. Augustine, FL 32084		Principal Office Address same	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
		3. Date Formed or Registered 9/4/97	
		3a. Date of Last Report	
		4. State or Country of Formation St. John's	
		5a. Capital Contributions as Shown on record \$20,000.00	
		5b. Amount of Capital Contributions in FLORIDA to date: \$20,000.00	
		6. FEI Number 59-3466685	
		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
8. Make check payable to: Dept. of State (See reverse side for fee information)			

SL 1/16

9. Name and Address of Current Registered Agent Rommelle V. Such 154 San Marco Ave St. Augustine, FL 32084		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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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) NDK Management Corporation	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 154 San Marco Ave.	11b. City, State & Zip Code St. Augustine, FL 32084	11c. Registration/Document Number P97000076638
500002406985--3 -01/21/98--01085--004 *****252.50 *****252.50			

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  by: Rommelle V. Such, President DATE 12/30/97
 Typed or Printed Name of General Partner Signing Form NDK Management Corporation Daytime Telephone Number 904-823-3777

CR2E003 (6/97)