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

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



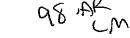
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT # **A97000002433**



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LUX HOLDINGS, LTD.	٩	8 AK	M.				
Mailing Address C/O ESTEIN & ASSOCIATES. U.S.A. 5211 INTERNATIONAL DR INTERN. STATION ORLANDO FL 32819 2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	Principal Office Address C/O ESTEIN & ASSOCIATES. U.S.A. 5211 INTERNATIONAL DR., INTERN. STATION ORLANDO FL 32819 Za. Principal Office Address Suite, Apt. #, etc. City & State Zip Country			3. Date Formed or Registered 11/07/1997 3a. Date of Last Report 02/23/1998 4. State or Country of Formation FL 6. FEI Number 59-3478894 7. Certificate of Status Desired	5b. Amou Contri to date 2,320	5a. Capital Contributions as Shown on record. \$990.00 5b. Amount of Capital Contributions in FLORIDA to date: 2,320,693 Applied For Not Applicable \$8.75 Additional Fee Required	
			[8. Make check payable to: Dept.	of State (See rever	secide for fee info	rmation)
9. Name and Address of Current Registered Agent VEGOSEN, DEAN 500 S. AUSTRALIAN AVENUE, 10TH FLOOR WEST PALM BEACH FL 33401 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above- for the purpose of changing its registered office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code amed limited partnership organized or registered under the laws of the State of Florida, submits this state of control of the contro					
A GENERAL PARTNER THAT I MUST	S A CORPORATION, I BE REGISTERED AN	LIMITED D ACTIV	PARTI E WIT	NERSHIP OR OTH H THIS OFFICE.		NESS ENT	ГІТҮ
11. Name(s) of General Partner(s) G.P. LUX CORPORATION	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 5211 INTERNATIONAL DR			City, State & Zip Code	PH 3: 50 EE, FLORIDA	0000095078	ber
Note: General partners MAY NOT 12. Ido hereby certify that the information supplied with this Corporations from any liability of non-compliance with S	filing is voluntarily furnished and does not	t qualify for the e	exemption sta	ated in Section 119.07(3)(k), Florida	Statutes. I releas	e the Division of	

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 agreed to execute this report agreed to execute 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

SIGNATURE