

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 15 PM 3:11



1. Name of Limited Partnership LPS CAPITAL, LTD.	1a. DOCUMENT # A98000000811
Mailing Address 4140 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33304	Principal Office Address 4140 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33304
2. Mailing Address 633 South Federal Highway Suite, Apt. #, etc. Fourth Floor City & State Fort Lauderdale, FL Zip Country 33301 US	2a. Principal Office Address 633 South Federal Highway Suite, Apt. #, etc. Fourth Floor City & State Fort Lauderdale, FL Zip Country 33301 US

3. Date Formed or Registered 03/31/1998	5a. Capital Contributions as Shown on record \$990.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date \$49,000
4. State or Country of Formation FL	6. FEI Number 65-0835532
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)

9. Name and Address of Current Registered Agent PARKINSON, ANTHONY J III 1140 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33304	10. If changed, now Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) 633 South Federal Highway Suite, Apt. #, etc. Fourth Floor City Fort Lauderdale Zip Code FL 33301
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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)

Anthony J. Parkinson III

DATE 4/7/99

**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) LPS CAPITAL, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1149 NORTH FEDERAL HI	11b. City, State & Zip Code FORT LAUDERDALE FL 33	11c. Registration/ Document Number P98000029556
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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

Anthony J. Parkinson III, Pres of LPS Capital, Inc.-GP

DATE 4/7/99

Typed or Printed Name of General Partner Signing Form Anthony J. Parkinson III

Daytime Telephone Number 954-525-6464

CR2E003 (12/98)