


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		FILED 99 MAR 31 AM 11:14 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Name of Limited Partnership E HAN, LTD.		1a. DOCUMENT # A98000002184			
Mailing Address 5310 N.W. 33RD AVENUE, SUITE 219 FT. LAUDERDALE FL 33309		Principal Office Address 5310 N.W. 33RD AVENUE, SUITE 219 FT. LAUDERDALE FL 33309		3. Date Formed or Registered 09/18/1998	
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		5a. Capital Contributions as Shown on record \$545,000.00	
Zip Country		Zip Country		5b. Amount of Capital Contributions in FLORIDA to date	
				6. FEI Number 65-0867331	
				7. Certificate of Status Desired <input 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 BARBER, KENNETH T 5310 N.W. 33RD AVENUE, SUITE 219 FT. LAUDERDALE FL 33309		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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)		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b. City, State & Zip Code	
11c. Registration/Document Number					
AB VENTURES I, INC.		5310 N.W. 33RD AVENUE		FT. LAUDERDALE FL 333	
P98000080851		FL 4-7-99			
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 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 KENNETH T. BARBER DATE 3/26/99					
Typed or Printed Name of General Partner Signing Form Daytime Telephone Number 914-731-0666					

CR2E003 (12/98)