

**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. Moorthy
Secretary of State
DIVISION OF CORPORATIONS

99 JAN 22 AM 11:24

1. Name of Limited Partnership

1a. DOCUMENT #
A98000002253

**PROGRESSIVE COMMUNICATIONS
NETWORK, LTD.**

Mailing Address
**313 DIRKSEN DRIVE
DI Suite L
DeBary, FL 32713**

Principal Office Address
**313 DIRKSEN DRIVE
DI Suite L
DeBary, FL
32713**

3. Date Form Being Filed
9/29/98

5a. Capital Contribution
See 5a. Form
\$50,000.00

3a. Date of Partnership

5b. Amount of Capital
Contributed in FL
\$6,000.00

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. State or County of Formation
FLORIDA

6. FID Number
59-3541817

☐ Applied For
☐ Not Applicable

7. Certificate of State Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to Dept. of State (payee's name is on back of form)

9. Name and Address of Current Registered Agent

**Joseph Rivieccio
313 DIRKSEN DRIVE
DI Suite L
DeBary, FL 32713**

10. If changed, New Registered Agent's Office

Name
Street Address (P.O. Box Number, if applicable)
Suite, Apt. #, etc.
City
State
Zip

FL Zip Code

10a. Pursuant to the provisions of sections 620.10(1) and 620.182, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, hereby represents and warrants 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 partnership. The entity, except the agent of limited registered agent, is familiar with, and except 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 Number)

11b. City, State & Zip Code

11c. Registered
Discipline Number

Joseph Rivieccio

313 DIRKSEN DRIVE

**DI Suite L, DeBary
FL 32713**

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-02/05/99--01092--015
****141.25 ****141.25**

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)(g), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(g) in the event that the information supplied is deemed exempt from public release. I further certify that the information and certification in 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

Joseph Rivieccio (GP)

DATE

12/10/98

Typed or Printed Name of General Partner Signing Form

Joseph Rivieccio

Daytime Telephone Number

407-668-5228

CP2EC03 (8/98)