

**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. Martham
Secretary of State
DIVISION OF CORPORATIONS

SEARCHED INDEXED SERIALIZED FILED
12-18-98

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1. Name of Limited Partnership	1a. DOCUMENT # A98000002289
Ashley Espresso, Ltd.	

Mailing Address	Principal Office Address	3. Date Formed or Registered 10/05/98	5a. Capital Contributions as Shown on record \$40,000.00
3201 South Dale Mabry Tampa, Florida 33629	3201 South Dale Mabry Tampa, Florida 33629	3a. Date of Last Report N/A	5b. Amount of Capital Contributions in FLORIDA to date \$40,000.00
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation Florida	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 59-3535007	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	7. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip	Zip	8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
Robert W. Bell, Sr. 5146 San Jose Tampa, Florida 33629	Name Street Address (P.O. Box Number Is Not Acceptable) Suite Apt. #, etc City
	FL 12-18-98

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) N/A 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
Robert W. Bell, Sr.	5146 San Jose	Tampa, Florida 33629	N/A
		700002778477-9 -02/17/98-01070-014 ***368.75 ***368.75	

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

Robert W. Bell, Sr.

Robert W. Bell, Sr.

DATE

12-18-98

813/287-0371