EFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP SUBJECT TO REVOCATION AND \$500 PENALTY FEE

SUBJECT TO REVO	Cation and <u>\$500 Penai</u>	<u>TY FEE</u>			
LIMITED PARTNERSHIP ANNUAL REPORT 1999		• Mortham y of State		SECF DIVISIO 99.14	FILED RETARY OF STATE N OF CORPORATIONS
1. Name of Limited Partnership	1a. DOCUMENT # A98000002588		99 JAN -4 PM 3: 01		
Audio Departure, Lt	d.				
				001/19	
Mailing Address 3121 NE 48th Street	Principal Office Address		7.5	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
Lighthouse Point, FL 33064	2 32	** **		11/16/98 3a. Date of Last Report	\$990.00
	•			N/A	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation Florida	\$990.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		÷-	6. FEI Number	Applied For Not Applicable
City & State	City & State			7. Certificate of Status Desired	\$8.75 Additional
Zip Country	Zip	Country		8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee information
					
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office			
Brenda F. Pagliaro	<u> </u>	Name			
3121 NE 48th Street	Street Address (P.O. Box Number Is Not Acceptable)				
Lighthouse Point, FL	33064	Suite, Apt. #,	elc		
		City FL Zip Code			
10a. Pursuant to the provisions of sections 620,1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	egistered agent, or both, in the State of Fi	orida. Such chanç			
A GENERAL PARTNER THAT I	S A CORPORATION, BE REGISTERED AN				R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each Gene	<u> </u>	11b.	City, State & Zip Code	11c. Registration/ Document Number
Four Star Realty Management, Inc.	3121 NE 48th	Street		nthouse Point,	P98000095670

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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 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 trus
empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Waden E. Emery, III, Preside Dylfme Telephone Number (954) 489-1002

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