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. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership 1a. DOCUMENT# B9400000132 SECRETARY OF STATE TALLAHASSEE. FLORIDA					98 DEC 28 AM	p: 33			
CORAL-TGFYE, LTD. Mailing Address	1. Name of Limited Partnership	1a. DOCUN B9400000	1a. DOCUMENT # B9400000132						
Cyr. R. FOWER POINT AVE DOVER DE 19901 2. Mailling Address 2a. Principal Office Address 2a. Principal Office Address DE Suite, Apt. #, etc. City & State City & State City & State City & State Country Top Country To	CORAL-TGFYE, LTD.								
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2. Meiling Address 2. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Country Zip Zip Zip Zip Zip Zip Zip Zi						Contr to dat	int of Capital ibutions in FLORIDA e:		
Suite, Apt. #, etc. City & State Country To	2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address						
Zip Country R, Make check payuable to: Dept. of Salas (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office MADIGAN, TERRELL C 206 SOUTH ADAMS STREET TALLAHASSEE FL 32301 Site Address (RO. Box Number is Not Acceptable) FL Zip Code						<u></u>			
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 MADIGAN, TERRELL C 206 SOUTH ADAMS STREET TALLAHASSEE FL 32301 Sulte, 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 agent, or both, in the State of Florida. Such change was authorized by its general partner(a). I hereby accept the appointment of registered agent an answer and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) AGENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(a) of General Partner(e) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Registration/Document Numbers TGFYE, INC. 32 LOOCKERMAN SQUARE, DOVER DE 19901 F94000001815 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. 1do hereby certify that the information supplied with the lifting is voluntarity furnished and does not qualify for the exemption stated in Section 119.07(3)(6), Florida Statutes. I release the Division of	City & State	City & State					\$8.75 Additional		
MADIGAN, TERRELL C 206 SOUTH ADAMS STREET TALLAHASSEE FL 32301 TOAL Pursuant to the provisions of sections 620.1051 and 620.132, 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, a manufact with, and accept the obligations of section 620.132, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) 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(s) 11b. City, State & Zip Code 11c. Registration/ Document Number TGFYE, INC. 32 LOOCKERMAN SQUARE, DOVER DE 19901 F94000001815 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12. Ido hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the everyption stated in Section 119.07(3)(9), Florida Statutes. I release the Division of	Zlp Country	Zip			8. Make check payable to: Dept. of	State (See reve			
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TALLAHASSEE FL 32301 Suite, Apt. #, etc. City				Street Address (F.O. Box Number is Not Acceptable)					
City	· ·	Suite. Apt. #, etc.							
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, submitts this statement for the purpose of changing its registered diffice 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, 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 (no NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Registration DOVER DE 19901 F94000001815 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of	TALLACIAGGE PE 02001						Zin Code		
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nnual report is true and accurate and that my signature shall have the sar wered to execute this report as required by chapter 620, Florida Statutes.

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TEFYE , INC

RICHARD FOUNES