FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1997



TAD TEMPORARIES, LIMITED PARTNERSHIP

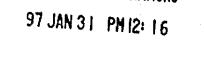
FLORIDA DEPARTMENT OF STATE

Sandra Mortham

1. Name of Limited Partnership

DOCUMENT# 1a. B9400000353

FILED DIVISION OF CORPORATIONS Secretary of State DIVISION OF CORPORATIONS





illing Address Principal Office Address 639 MASSACHUSETTS AVENUE 639 MASSACHUSETTS AVENUE			3. Date Formed or Registered 08/31/1994		5a. Capital Contributions as Shown on record.	
CAMBRIDGE MA 02139	CAMBRIDGE MA 02139	CAMBRIDGE MA 02139		\$75,000.00 5b. Amount of Capital Contributions in FLORIDA Contributions in FLORIDA		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation DE	to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 04-3220675	Applied For Not Applicable		
City & State Zip Country	City & State	Zip Country			\$8.75 Additional Fee Required	
			8. Make check payable to: Dept. of State (See reverse side for fee inform		rse side for fee information)	
9. Name and Address of Curre	nt Registered Agent	T	10. If changed, new Registere	d Agent/Office		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		Name				
		Street Address (P.O. Box Number Is Not Acceptable)				
PLANTATION FL 33324		Suite, Apt. #, etc.				
		City		FL Zip Code		
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUS		IMITED PAR D ACTIVE W	RTNERSHIP OR OTHE /ITH THIS OFFICE.		IESS ENTITY	
11. Name(s) of General Partner(s)	Address of Each Genera 11a. (Do NOT Use Post Office Bo	l Pertner ox Numbers) 11b	City, State & Zip Code	11c.		
TAD RESOURCES INTERNATIONAL,	639 MASSACHUSETTS				Registration/ Document Number	
	OSS MASSACIOSETTS	AVE	CAMBRIDGE MA 02139 700002 -02/11 ****\$	9	Document Number 0074 New See	
Note: General partners MAY NO	T be changed on this form	n; an amenda	アロロロ2 -02/11 ****5 nent must be filed to cha	0 UB4= 797-01 41.25	0074 New 162 - 18162 - 182 - 182 - 182 - 182 - 183 - 184 - 185 -	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance withis annual report is true and accurate and that my empowered to execute this report ar required by on	T be changed on this form this filing is voluntarily furnished and does no section 119.07(3)(k) in the event that the interest has the same legal effects as	n; an amenda It qualify for the exemp	TODIO 2 -U2/11 ***本多 nent must be filed to cha tion stated in Section 119.07(3)(k), Florida eemed exempt from public access. I furth urther certify that I am a General Partner of	Ange a ge Statutes, I relea or certify that the the limited part	Document Number 0074 Reference 162-031 ***********************************	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance withis annual report is true and accurate and that my empowered to execute this report as required by of SIGNATURE	T be changed on this form this filing is voluntarily furnished and does no section 119.07(3)(k) in the event that the interest has the same legal effects as	1; an amenda of qualify for the exempt formation supplied is d if made under oath. I fo	PODD 2 -U2/11 ******* nent must be filed to cha tion stated in Section 119.07(3)(k). Florida eemed exempt from public access. I turth urther certify that I am a General Partner of	Ange a ge Statutes, I relea or certify that the the limited part	Document Number 0074 REPLANTED TO THE PLANTED TO THE PARTIES OF THE DIVISION OF THE PARTIES OF	