## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** B95000000233

DIVISION OF CORPORATIONS

97 DEC 31 PM 1: 18



SHAMROCK ADVENTURE XII, LTD.					
			001/13		
Mailing Address	Principal Office Address		3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.	
2401 FOUNTAINVIEW. SUITE 801	TE 801 2401 FOUNTAINVIEW, SUITE 801		06/27/1995	<b>6000.00</b>	
HOUSTON TX 77057	HOUSTON TX 77057		3a. Date of Last Report	\$980.00	
			01/28/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	<del> ,</del>	4. State or Country of Formation	to date:	
To Maining Moores	Ed. Principal Onice Address		TX	980.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		76-0467128	Not Applicable	
Zip Country	Zip Co	puntry	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
2.p			8. Make check payable to: Dept	of State (See reverse side for fee information)	
Q Name and Address of Co	Ivant Basistered Acest		10 If changed, now Positor	orad Apont/Office	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office Name			
			Streel Address (P.O. Box Number Is Not Acceptable)		
CORPORATION COMPANY OF MIAMI		Streel Address (P.O. E	lox Number Is Not Acceptable)		
201 SOUTH BISCAYNE BLVD.			lox Number Is Not Acceptable)		
	5	Suile, Apt #, etc.	lox Number Is Not Acceptable)	1 70 Code	
201 SOUTH BISCAYNE BLVD. 1600 MIAMI CENTER	5		lox Number Is Not Acceptable)	FL Zip Code	
201 SOUTH BISCAYNE BLVD. 1600 MIAMI CENTER MIAMI FL 33131  10a. Pursuant to the provisions of sections 620.108	51 and 620.192, Florida Statutes, the above-named linco or registered agent, or both, in the State of Florida	Suile, Apt #, etc.  City  mited partnership orga	inized or registered under the laws	f the State of Florida, submits this statement	
201 SOUTH BISCAYNE BLVD. 1600 MIAMI CENTER MIAMI FL 33131  10a. Pursuant to the provisions of sections 620.103 for the purpose of changing its registered office agent. If am familiar with, and accept the oblig  SIGNATURE (Registered Agent Accepting Appointment	51 and 620.192, Florida Statutes, the above-named kin co or registered agent, or both, in the State of Florida pations of section 620.192, Florida Statutes.	Suile, Apt #, etc. City miled partnership orga Such change was au	tnized or registered under the laws of thorized by its general partner(s). H	of the State of Florida, submits this statement hereby accept the appointment of registered	
201 SOUTH BISCAYNE BLVD. 1600 MIAM! CENTER MIAM! FL 33131  10a. Pursuant to the provisions of sections 620 103 for the purpose of changing its registered offe agent. I am familiar with, and accept the oblig  SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	51 and 620.192, Florida Statutes, the above-named lince or registered agent, or both, in the State of Florida pations of section 620.192, Florida Statutes.  The section 620 statutes are the section 620 statutes.  AT IS A CORPORATION, LINUST BE REGISTERED AND	Suile, Apt #, etc.  City  miled partnership org: Such change was au	inized or registered under the laws of thorized by its general partner(s). H	FL   of the State of Florida, submits this statement hereby accept the appointment of registered  TE  ER BUSINESS ENTITY	
201 SOUTH BISCAYNE BLVD. 1600 MIAM! CENTER MIAM! FL 33131  10a. Pursuant to the provisions of sections 620 103 for the purpose of changing its registered offe agent. I am familiar with, and accept the oblig  SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	51 and 620,192, Florida Statutes, the above-named linco or registered agent, or both, in the State of Florida pations of section 620,192, Florida Statutes.	Suile, Apt #, etc.  City  miled partnership orga Such change was au  MITED PART ACTIVE WI	inized or registered under the laws of thorized by its general partner(s). H	of the State of Florida, submits this statement hereby accept the appointment of registered	
201 SOUTH BISCAYNE BLVD. 1600 MIAMI CENTER MIAMI FL 33131  10a. Pursuant to the provisions of sections 620.108 for the purpose of changing its registered offe egent. I am familiar with, and accept the oblig  SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	51 and 620.192, Florida Statutes, the above-named kin co or registered agent, or both, in the State of Florida pations of section 620.192, Florida Statutes.  AT IS A CORPORATION, LINUST BE REGISTERED AND Address of Each General Pa	Suile, Apt #, etc.  City  miled partnership orgation of the change was authorized to t	nized or registered under the laws of thorized by its general partner(s). He DATNERSHIP OR OTH TH THIS OFFICE.	of the State of Florida, submits this statement hereby accept the appointment of registered  TE  Registration/	

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 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 Corporations from any liability of non-compliance with Soction 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	