

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAR 30 AM 10: 22



1. Name of Limited Partnership **1a. DOCUMENT #**
B96000000382

R&A FOOD SERVICES, L.P.

Mailing Address **Principal Office Address**
1801 CLINT MOORE ROAD, SUITE 215
BOCA RATON FL 33487
1201 ORANGE STREET
WILMINGTON DE

3. Date Formed or Registered
09/26/1996
5a. Capital Contributions as Shown on record.
\$36,799,346.00
3a. Date of Last Report
04/09/1997
5b. Amount of Capital Contributions in FL OHIDA to date:
4. State or Country of Formation
DE

2. Mailing Address **2a. Principal Office Address**
14103 Denver W. Pkwy
Suite, Apt. #, etc.

City & State **City & State**
Golden CO

Zip **Country** **Zip** **Country**
80401

6. FEI Number Applied For Not Applicable
65-0690283
7. Certificate of Status Desired \$8.75 Additional Fee Required
8. Make check payable to: Dept of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, 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 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) _____ 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
R&A FOOD SERVICES, INC.	1801 CLINT MOORE ROAD	BOCA RATON FL 33487	P39935
		300002478373- - 7 -04/03/98--01077--010 ****526.25 ****526.25	KWM

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 *[Signature]* DATE 3/26/98
AGRAPAPART 213 962-6525

CR2E003 (12/97)