

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. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 28 AM 10:17



1. Name of Limited Partnership

1a. DOCUMENT #
B97000000476

STERLING CASINO LINES, L.P.

Mailing Address

Principal Office Address

630 FIFTH AVENUE, SUITE 3240
NEW YORK NY 10111

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NEW YORK NY 10111

3. Date Formed or Registered

09/10/1997

5a. Capital Contributions as
Shown on record.

\$1,000.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date:

1,000.00

4. State or Country of Formation

DE

2. Mailing Address

101 George King Blvd.

Suite, Apt. #, etc.

Suite #3

City & State

Cape Canaveral, Fl.

Zip

32920

Country

BREVARD

2a. Principal Office Address

101 George King Blvd.

Suite, Apt. #, etc.

Suite #3

City & State

Cape Canaveral, Fl.

Zip

32920

Country

BREVARD

6. FEI Number

59-3467704

☐ Applied For
☒ Not Applicable

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

FF \$14.25

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

SEXTANT STERLING, LLC

630 FIFTH AVENUE, SUI

NEW YORK NY 10111

M97000000592

Amendment filed 4-28-98
Sextant Sterling I, Inc.

630 Fifth Ave. Suite
3240

New York, NY 10111

F97-4731

200002491252--7
-04/16/98--01115--001

****113.75 ****113.75

200002491252--7
-04/29/98--01094--001

*****88.75 *****36.25

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

Charles Murphy

DATE

APRIL 3 '98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/97)