## FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **B9800000562** 

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Stone (Art Or State)

BI CAPITAL PARTNERS, L.P.				BUNK BUNI BENK BUNK BUKU BING BIND 1104 II
Mailing Address  10100 W. SAMPLE ROAD. SUITE 401  CORAL SPRINGS FL 33065	Principal Office Address  10100 W. SAMPLE ROAD, SUITE 401  CORAL SPRINGS FL 33065		3. Date Formed or Registered 09/18/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record \$100,000,000.000
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date
s. Maining Address	20. Timopar Office Addition		DE	$\bigcirc$
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		65-088 49° 7. Certificate of Status Desired	<b>4</b>
Zip Country	Zip	Country		\$8.75 Additional Fee Required  State (See reverse side for fee information
Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
LOVITO, PAUL F JR. 10100 W. SAMPLE ROAD, SUITE 401		Name Street Address (P.O. Box Number Is Not Acceptable)		
	City		Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or ragent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT	egistored agent, or both, in the State of Flo s of section 620.192, Florida Statules.	ida Such change was a	uuthorized by its general partner(s). There DATE	by accept the appointment of registered
MUS	T BE REGISTERED AN	ND ACTIVE W	VITH THIS OFFICE.	Panishation
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Numbers)		City, State & Zip Code	11c. Document Number
LBI ASSET MANAGEMENT, LLC	10100 W. SAMPLE ROAD,		CORAL SPRINGS FL 3306	M9800001045
3			na./24	F) 1 F; (*) 24 22 3 (2/1981063 062 a; 25   ****141.25
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rou never occur may make the information supplied with this timing is voluntarily running and one one quality for me exemption stated in section (19 o/(3)(k)), Florida Stations (19), and the profit formation supplied is deemed exempt from public access. If urther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legisl effects as if made under oath. If urther 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

Daytime Telephone Number (954)346-5 299