2003 LIMITED PARTNERSHIP

UN	!FORM	BUSINE	SS REPOR	T (L	JBR)			
DOCU 1. Entity Nam LANTAN	0001924)1924			FIL 03 MAY -6	PM 1:30		
Principal Place of Business C/O NORMAN S. WEINSTEIN 210 KNICKERBOCKER ROAD CRESSKILL NJ 07626			Mailing Address C/O NORMAN S. WEINSTEIN 210 KNICKERBOCKER ROAD CRESSKILL NJ 07626				SECRETARY TABLAHASSEI	OF STATE E, FLORIDA
2. Principal Place of Business 75 NE 6th Avenue 3. Mailing Addres 75 NE 6th				Avenue				
Suite, Apt. Suite	103		Suite, Apt. #, etc. Suite 103			_	DUE BY MAY 1, 2003	i
	Beach FL		City & State Delray Beach, FL Zip Country				4. FEI Number 65-1062782	Applied For Not Applicable
Zip Country 33483 USA 6. Name and Address of Current R			Zip 33483	USZ	JSA 5. Certificate of Status Desired L			3.75 Additional se Required
WEINSTEIN, NORMAN S 411 NE 7TH AVENUE DELRAY BEACH FL 33483					75 NE Suite	Address (P.O. Box Number is Not Acceptable) IE 6th Avenue ie 103		
8. The above named entity submits this statement for the purpose of changing its registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. 10. Amount of Capital Cin FLORIDA to date A GENERAL PARTNER THAT IS A BUSINESS ENTITED.					outions \$7,	egistere	DATE 11. MAKE CHECK PAYABLE TO SEEREVERSE SIDE FOR F	FL. DEPT. OF STATE
12.			/ NOT be changed on th				t must be filed to change a general partni ADDRESS CHANGES ONLY	er.
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F9700006346 NSW DEVELOPMENT CORP. 210 KNICKERBOCKER ROAD			STREE CITY-			NE 6th Avenue, Suite 103	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK TIENE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/28/03

561-278-9292

Daytime Phone #