

**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



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

99 JAN -6 AM 10:13

1. Name of Limited Partnership
MIAMI GARDENS PLAZA LIMITED PARTNERSHIP

1a. DOCUMENT #
A21998



Mailing Address 9053 OLD PINE RD. BOCA RATON FL 33428	Principal Office Address 9053 OLD PINE RD. BOCA RATON FL 33428
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered
02/10/1986

3a. Date of Last Report
12/29/1997

4. State or Country of Formation
IL

6. FEI Number
36-3363458

7. Certificate of Status Desired
 \$8.75 Additional Fee Required

5a. Capital Contributions as Shown on record
\$696,000.00

5b. Amount of Capital Contributions in FL OR (DA) to date
696,000.00

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

BLOTNICK, ALEC
9053 OLD PINE ROAD
BOCA RATON FL 33428

10. If changed, new Registered Agent Office

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
Suite, Apt. #, etc. _____
City _____
State **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
PRITIKIN, JEFFREY A	1308 WHITNEY LANE	BUFFALO GROVE IL	
BLOTNICK, ALEC	9053 OLD PINE ROAD	BOCA RATON FL	

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 _____ DATE **12/30/98**

Typed or Printed Name of General Partner Signing Form: **ALEC BLOTNICK** (Daytime Telephone Number) **(305) 512 1223**

CR2E003 (8/98)