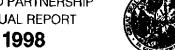
FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT**



GROSVENOR PANIC LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A32303

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC -9 PM 3: 12 with



Adling Address Principel Office Address 2401 PGA BLVD. SUITE 280 SUITE 280 PALM BCH. GARDENS FL 33410 2. Malling Address Suite, Apt. #, etc. City & State Principal Office Address City & State			3. Date Formed or Registered 12/09/1991 3a. Date of Last Report 12/30/1996 4. State or Country of Formation FL 6. FEI Number 65-0317005	\$2,3	all Contributions as who have record 348,460.00 Unit of Capital ributions in FLORIDA to Applied For Not Applicable
Zip Country	Zip	Zip Country		d \$8.75 Additional Feo Required opt. of State (See reverse side for fee Information)	
9. Name and Address of Current Registered Agent		10. If changed, now Registered Agent/Office			
for the purpose of changing its registered office or registered agent, or both, in the State of egent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code amed limited partnership organized or registered under the laws of the State of Florida, submits this statement Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered DATE			
A GENERAL PARTNER THA	IT IS A CORPORATION, I ST BE REGISTERED AN	LIMITED PA	ARTNERSHIP OR OTHE	R BUSI	NESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each Gener (Do NOT Use Post Office B		b. City, State & Zip Code	11c.	Registration/ Document Numbor
HALMISH MANAGEMENT CORP.	2401 PGA BLVD. STE. 2		PALM BCH. GARDENS FL 30002: -12/12 ****5	P34 ⊋ 7 1 78707 41.25	894
Notey General partners MAY NO	OT be changed on this form	n; an amend	lment must be filed to cha	nge a g	eneral partner.

12. I do hereby certify that the information supplied will 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 logal effects as if made under eath. 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

Haimish Management Corporation Typed or Printed Name of General Partner Signing Form Thomas Hamilton, President