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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



City & State

Zip

RAM/BSE COMMUNICATIONS, LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

City & State

SIGNATURE

Zip

DOCUMENT# A32871

FILED 98 DEC 24 PH 2: 02 SECRETARY OF STATE TALLAHASSEE, FLORIDA

7. Certificate of Status Desired

Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
10 WOODBRIDGE CENTER DRIVE, 4TH FLOOR	10 WOODBRIDGE CENTER DRIVE. 4TH FLOOR	04/22/1992		
WOODBRIDGE NJ 07095	WOODBRIDGE NJ 07095	3a. Date of Last Report	\$5,000,000.00	
		10/03/1997	5b. Amount of Capital Contributions in FLORIDA	
3	32	4. State or Country of Formation	to date:	
2. Mailing Address	2a. Principal Office Address	DE	\$5,000,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For	
0		22-3146429	Not Applicable	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
UNITED CORPORATE SERVICES, INC.	Name
801 NORTHEAST 167TH STREET, SUITE 305	Street Address (P.O. Box Number Is Not Acceptable)
NORTH MIAMI BEACH FL 33162	Sulte, Apt. #, etc.
	City FL Zip Code

Country

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)

Country

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

Not Applicable

\$8.75 Additional Fee Required

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE

, INCOLDENCED AND ACTIVE WITH THE CITIES.					
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		
RAM COMMUNICATIONS GROUP, IN	10 WOODBRIDGE CENTER	WOODBRIDGE NJ 07095	P37423		
BELLSOUTH MOBILE DATA, INC.	1100 PEACHTREE ST. NE	ATLANTA GA 30309	P38016		
		9000027	429696 991997- - 997		

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 filling 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 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 this annual report is true this report as required by chapter 620, Florida Statutes.

Michael White

Typed or Printed Name of General Partner Signing Form

Vice President & DATE 12/14/98

RAM COMMUNICATIONS GROUP, INC. The Property 732-602-5522