

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

FILED

98 MAR 20 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



LIMITED PARTNERSHIP
ANNUAL REPORT
1998

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

1. Name of Limited Partnership 1233 COLLINS AVENUE, LTD.	1a. DOCUMENT # A96000000778
---	---------------------------------------



Mailing Address C/O ISLAND TRADING 825 EIGHTH AVE., 84TH FLOOR NEW YORK NY 10019	Principal Office Address 1330 OCEAN DRIVE, 4TH FLOOR MIAMI BEACH FL 33139
2. Mailing Address 4 Columbus Circle Suite, Apt. #, etc. 5th Floor City & State New York, N.Y. Zip 10019	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country USA

3. Date Formed or Registered 04/23/1996	5a. Capital Contributions as Shown on record. \$100.00
3a. Date of Last Report 04/04/1997	5b. Amount of Capital Contributions in FLORIDA to date. \$ 559,760 ⁰⁰
4. State or Country of Formation FL	6. FEI Number 13-3916674 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

10. If changed, new Registered Agent/Office Name FF \$526.25 Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City 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. Registrar/Document Number
ISLAND TRADING HOLDINGS, INC	1330 OCEAN DRIVE, 4TH	MIAMI BEACH FL 33139	P98000035860

800002462908--3
-03/20/98--01014--009
***2276.25 ***526.25

dec

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 Meg Sueb DATE 3/16/98

CR2E003 (12/97)