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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

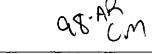
Malling Address

1a. DOCUMENT # A9600001993

Principal Office Address

KENDALL COVE, LTD.

Typed or Printed Name of General Partner Signing Form



FILED 98 JAN 14 PM 12: 45

SLCRETARY OF STATE TALLAHASSEE, FLORIDA



DATE November 19, 1997

3. Date Formed or Registered

200 SOUTH BISCAYNE BLVD., SUITE 2410 MIAMI FL 33131	200 SOUTH BISCAYNE BLVD SUITE 2410 MIAMI FL 33131		10/28/1996 3a. Date of Last Report	\$4,950.00	
			11/04/1996 4. State or Country of Formation	Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		State or Country or Formation	\$2,338,054	
P. O. Box 191768	420 Lincoln Road		FL \\ \psi_2,330,034		
Suite, Apt. #, etc.	Suite, Apt. #, etc. Sulte 432		6. FEI Number 65-0700541	Applied For	
City & State	City & State			Not Applicable	
Miami, Florida	Miami Beach, Florida		7. Certificate of Status Desired	\$8,75 Additional Fee Regulred	
Zip Country 33119 USA	Zip Country USA		8. Make check payable to: Dept. of State (See reverse side for fee Information)		
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office					
CEJAS, PAUL L 200 SOUTH BISCAYNE BLVD., SUITE 2410		Name PLC 1	PLC Investments, Inc.		
		Street Address (P.O	ress (P.O. Box Number Is Not Acceptable)		
		420 I Sulte, Apt. #, etc.	420 Lincoln Road		
MIVMI FL 33131	Sult City		uite 432		
			ami Beach, FL Zip Code 33139		
10a. Pursuant to the provisions of sections 620 1051 and 620 192. Fiorida 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) 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 Pertner(s)	11a. Address of Each General P	artner Numbers) 11b	City, State & Zip Code	11c. Registration/ Document Number	
PLC COVE, INC.	200 SOUTH BISCAYNE BL	м	IAMI FL 33131	P96000087080	
				HOO3456 9801098009 7.50 ****437.50	
Note: Consult nations May NOT	a changed on this form.		****10	1003456 9801098010 3.75 ****103.75	

1 do hereby certify that the information supplied with this filing is votuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida Statutes. Frelease the Division of

Secretary & Treasurer

Too hereby certify that the information supplied with reis ming is voluntarily furnished and dues not quality for the exemption stated in Section 1.19.07(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.

See The Cove of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.

See The Cove of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.