FILE ON 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

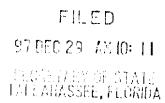
Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

¹⁸A23700 **DOCUMENT #**

919 COLLINS ASSOCIATES, LTD.

98-ALM





| | | | | | | |
|---|--|---|---|---|--|--|
| Malling Address 103 GREENE STREET | Principal Office Address 103 GREENE STREET | | 3. Date Formed or Registered 12/03/1986 | 12/03/1986 | | |
| NEW YORK NY 10012 | NEW YORK NY 10012 | | 3a. Date of Last Report 02/21/1997 | | \$75,000.00 5b. Amount of Capital Contributions in ELORIDA | |
| 2. Mailing Address | 2a. Principal Office Addres | | 4. State or Country of Formation | Control to da | in Groupital ibutions in FLORIDA to: | |
| | | | FL | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FE! Number 13-3408359 | | Applied For | |
| City & State | City & State | | 7. Certificate of Status Desired | | Not Applicable | |
| Zip Country | 7φ Country | | | | \$8.75 Additional Fee Required | |
| - | | | 8. Make check payable to: De | ot. of State (See rev | erse side for fee informa | |
| 9. Name and Address of Current Registered Agent | | 10. If changed, new Registered Agent/Office | | | | |
| MARLO COURTNEY 640 OCEAN DRIVE MIAMI BEACH FL 33132 | | Name | | | | |
| | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | | Suite, Apt #, etc. | | | | |
| | | | | | | |
| for the purpose of changing its registered off | ice or registered agent, or both, in the State of | | | | | |
| for the purpose of changing its registered offi agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH | ice or registered agent, or both, in the State of gations of section 620.192, Florida Statutes. int). | named limited partnerst of Florida. Such change | was authorized by its general partner(s). DARTNERSHIP OR OT | of the State of Flor I hereby accept the | da, submits this stateme appointment of registe∞ | |
| for the purpose of changing its registered offi agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH | nce or registered agent or both, in the State of gations of section 620, 192, florida Statules. INTERMEDIATION ACORPORATION UST BE REGISTERED A | named limited partnerst of Florida Such change N, LIMITED P AND ACTIVE | was authorized by its general partner(s). DARTNERSHIP OR OT | of the State of Flor I hereby accept the | da, submits this stateme appointment of registe∞ | |
| for the purpose of changing its registered off agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH | ice or registered agent or both, in the State of gations of section 620-192, florida Statutos. INT IS A CORPORATION UST BE REGISTERED A | named limited partnerst of Florida Such change N, LIMITED P AND ACTIVE oneral Partner ce Rox Numbers) | vas authorized by its general partner(s). PARTNERSHIP OR OTI | ATE | da, submits this stateme appointment of registers NESS ENTIT | |
| sgent. Lem femilier with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH MI 11. Name(s) of General Partner(s) | nt) . AT IS A CORPORATION UST BE REGISTERED / Address of Each G (Do NOT Use Post Off) | named limited partnerst of Florida Such change N, LIMITED P AND ACTIVE oneral Partner ce Rox Numbers) | ARTNERSHIP OR OTICE. 1b. City, State & Zip Code NEW YORK NY | ATE . HER BUSII 11c. M42 12398 /13/980 | da, submits this stateme appointment of registered NESS ENTITY Registration/ Document Number | |

SIGNATURE .

12. I do hereby certify that the information sup

Corporations from any tiability of non-con-

this annual report is true and accurate empowered to execute this repl

RICHARD A. GOLDMAN

had with this is voluntarily furnished and doos not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I release the Division of

hance 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 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