

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

FILED

98 APR -8 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # B96000000262
UNTERBERG HARRIS CAPITAL MANAGEMENT LIMITED PART NERSHIP <div style="text-align: right; font-size: 1.2em;">98-AR</div>	



Mailing Address	Principal Office Address
10 EAST 50TH STREET NEW YORK NY 10022	10 EAST 50TH STREET NEW YORK NY 10022
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

3. Date Formed or Registered 07/08/1996	5a. Capital Contributions as Shown on record. \$21,000,000.00
3a. Date of Last Report 01/14/1997	
4. State or Country of Formation DE	5b. Amount of Capital Contributions in FLORIDA to date:
6. FEI Number 13-3707774	<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

10. If changed, new Registered Agent/Office

Name: **FF-\$526.25**

Street Address (P.O. Box Number is Not Acceptable): **000002484280--9**

Suite, Apt. #, etc.: **-04/09/98--01088--001**

City: **FL**

Zip Code: **32301**

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. Registration/Document Number
UNTERBERG, THOMAS I	10 EAST 50TH STREET	NEW YORK NY 10022	
ARNO, ANDREW	10 EAST 50TH STREET	NEW YORK NY 10022	
OWEN, JODY A	10 EAST 50TH STREET	NEW YORK NY 10022	
LAVITT, MEL S	10 EAST 50TH STREET	NEW YORK NY 10022	
WACHTER, DAVID S	10 EAST 50TH STREET	NEW YORK NY 10022	
FINNERTY, BRIAN L	10 EAST 50TH STREET	NEW YORK NY 10022	

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  DATE **4/7/98**

Typed or Printed Name of General Partner Signing Form: **Robert Namuck** Daytime Telephone Number: **212-572-8175**

CR2E003 (12/97)