


APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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FILED
98 MAY 11 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

DOCUMENT # A08766 1. Name of Limited Partnership Sheraton Bal Harbour Associates, Ltd.

2. Mailing Address c/o ITT TAX DEPARTMENT Suite, Apt. #, etc. 1330 Ave of the Americas City & State NY NY Zip 10019 Country USA	3. Principal Office Address 9701 Collins Avenue Suite, Apt. #, etc. City & State Bal Harbour, FL Zip 33154 Country USA	4. Date Formed or Registered To Do Business in Florida 4/1/80 5. FEI Number 59-1945689 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status 7. State or Country of Formation Florida
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8a. Capital Contributions as Shown on Record \$ 3.00 8b. Amount of Capital Contributions in FLORIDA to date: 0	FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$68.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
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9. Name and Address of Current Registered Agent Walker, J. Frost One International Place Ste. 1250 Miami, FL. 33131	10. If changed, new registered agent/office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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
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A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
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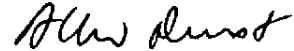
11. Names of General Partner(s) Sheraton Operating Corp.	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 60 State Street	City, State and Zip Code Boston, MA 300002522913--6 -05/14/98--01013--001 ****641.25 ****641.25	11a. Registration Document Number 821022
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REINSTATEMENT

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Dec

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.
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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  Typed or Printed Name of General Partner Signing Form Alan J. Durst, VP, Sheraton Operating Corp.	DATE 5/3/98 Telephone Number 210.258.1426
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CR2E039 (12/97)

ARTHUR ANDERSEN

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

May 8, 1998

Florida Department of State
Sandra B. Mortham
Secretary of State
Division Of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Sheraton Bal Harbour Associates, Ltd.
Document Number: A08766

212-258-1426

Dear Sir/Madam:

As accountants for and on behalf of the above mentioned taxpayer we respond to your letter of revocation dated April 15, 1998 (copy attached for your convenience) and enclose a completed Application for Reinstatement for Limited Partnership payment in the amount of \$641.25 to satisfy the fee requirement.

Please send us documentation supporting the taxpayer's return to a position of good standing with the state of Florida.

Please call me at the above number if you have any questions.

Very truly yours,

Arthur Andersen LLP


By: Stephen A. Hersh

Enclosure