FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

96 NOV 27 AM 8: 44

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

	A10940	
PPLEGATE PLAZA LTD.		LEATOR HORE SHOUL STOLL DOING FOLL HILL BLANCE OF SHOULD HOLE SHOUL SHOUL SHOUL SHOUL SHOUL SHOUL SHOUL SHOUL

Mailing Address	Principal Office Address		***************************************	3. Date Formed or Registered	58. Capital Contributions as Shown on record \$142,400.00		
1000 S WOODWARD	1000 S WOODWARD SUITE 201 BIRMINGHAM MI 48009			08/05/1981			
Suite 201 Birmingham mi 48009				3a. Date of Last Report			
District and Miles and Mil			11/30/1995	5b. Amount of Capital Contributions in FLORIDA			
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date:		
Suite, Apt. #, etc.	Suda Ant # eta			MI	\$142,400.00		
·	Suite, Apt. #, etc.			6. FEI Number 38-2403817	Applied For Not Applicable		
City & State	City & State			7. Certificate of Status Desired	<u> </u>	\$8.75 Additional	
Zip Country	Zip Country			Fee Required		Fee Required	
	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				
			EPH SAVIN				
3003 N.W. 1391H 51			ess (P.O. Box Number Is Not Acceptable) 3316 GRIFFIN ROAD				
HIALEAH FL 33014 Suite, Apt. #, etc.		etc.					
		City	FORT	LAUDERDALE	FL	^{Zip Code} 33312	
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. 11/21/96							
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)	Address of Each Genera		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
BROWN, EMERY			D10	RMINGHAM MI		Section (1971)	
·	1000 S. WOODWARD		ОН				
* RIVKIN, BERNARD	1000 S. WOODWARD		BIRMINGHAM MI				
SAVIN, JOSEPH	1000 S WOODWARD AVE		BIRMINGHAM MI				
	·			2000021 -12/10. ****\$	024 /9601 85.00	7522 094-021 ****585.00	
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 filling 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 formorphisms with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. If 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

JOSEPH SAVIN

DATE ____11/21/96_

810-647-3255 Daytime Telephone Number