## 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

1. Name of Limited Partnership

1a. DOCUMENT # A11829

OAK GROVE GROUP, LTD.



SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

96 OCT -2 PH 3: 56

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Mailing Address % THE PALINDROME CORP. 1185 AVE. OF THE AMERICAS NEW YORK NY 10036 US		Principal Office Address 15401 N.E. 6TH AVE. N. MIAMI BEACH FL 33162		3. Date Formed or Registered 12/30/1981 3a. Date of Last Report 10/12/1995	5a. Capital Contributions as Shown on record \$3,518,346.00	
				10/12/1995	5b. Ansount of Capital	
				4. State or Country of Formation	Contributions in FLORIDA to date	
2. Mailing Address		2a. Principal Office Address		FL	\$3,518,346.00	
Suite, Apt. #, etc.		Suite, Apt #, etc		6. FLI Number 59-2149018	Applied For Not Applicable	
City & State		City & State				
Zip	Country	Zφ	Country	7. Cert ficate of Status Desired		\$8.75 Additional Fee Required
2.10			Section,	8. Make check payable to Dept. of State (See reverse's oe for fee information		

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office		
SMITH HULSEY & BUSEY	Name		
1800 FLORIDA NATIONAL BANK TOWER 225 WATER STREET	Street Address (P.O. Box Number is Not Acceptable)  Suite Apt #, etc		
JACKSONVILLE FL 32202	City FL Z-p Code		

10a. Pursuant to the provisions of sections 620,1051 and 620,1051 and

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.

MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.								
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number					
KASSELL, BURTON R.	315 WEST 107TH STREET	NEW YORK NY						
PALINDROME CORP.	1185 AVE OF THE AMERI	NEW YORK NY	853639					
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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 Tirelease the Division of Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is doctred exempt from public access. I further certify that the information inclinated on this annual report is true and accurate that that my signature shall have the same legal effects of made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trusted engowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE \_

Typed or Printed Name of General Partner Signing Form:

Burton R. Kassell

DATE: 9/25/96

Daytime Telephone Number 212-869-6000

CR2E003 (6/96)