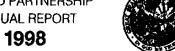
FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



SIGNATURE By: Jazar Manager LLC_

Typed or Printed Name of General Partner Signing Form

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # Ä13628

FILED

97 NOV +6 PH 3: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Daytime Telephone Number __203-629-3600



WALDREST ASSOCIATES LIMITED PARTNERSHIP			A 1901AN EEU KOBE IIIK DIID KABA ADII BIDII BIDII BIDII BIDII BIBII BIBII BIBII BIBII BIBII		
			FF SA	541.25	
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
500 W. PUTNAM AVE SUITE 400 GREENWICH CT 06830	500 W. PUTNAM AVE., SUITE 400 GREENWICH CT 06830		12/20/1982 3a. Date of Last Report	\$308,863.00	111
			11/25/1996	5b. Amount of Capital Contributions in FLORIDA	7
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation	to date:	1
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 13-3155290	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required	\dashv
Zip Country	Zip Cou	ıntry	8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee information	n)
9. Name and Address of Cu	rrent Registered Agent		10. If changed, new Registerer	d Agent/Office	-
		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Lip Code sed limited partnership organized or registered under the laws of the State of Florida, submits this stater orida. Such change was authorized by its general partner(s). I horeby accept the appointment of registered.			
SIGNATURE (Registered Agent Accepting Appointmen	ht)		DATE		ί
A GENERAL PARTNER TH	AT IS A CORPORATION, LIM	IITED PAR	TNERSHIP OR OTHE	R BUSINESS ENTITY	-
11. Name(s) of General Partner(s)	11a. Address of Each General Part (Do NOT Use Post Office Box Nu			11c. Registration/ Document Number	
JAZAR ASSOCOCIATES LLC	%500 W. PUTNAM AVE.,	1	REENWICH CT 06830	MATCCOCCU A5	R2E003 (6/97)
			800 <u>0</u> 02	3450188807 47.25 *****541.25	
•					
Note: General partners MAY N	IOT be changed on this form; a	ırı amenam	ent must be filed to cha	inge 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

James R. Greene, 3 Nember

Corporations from any liability of non-compliance with Section 119.07(3)(k) in pie event that the information supplied is deemed exempt from public access. 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 eath. 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 Stalulos

WALDREST ASSOCIATES LIMITED PARTNERSHAP BY: Jazar Associates LLC