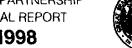
FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

SECRETARY OF STATE

1998	DIVISION OF CORPORATIONS		97 OCT -6 AM 7: 48			
Name of Limited Partnership	1a. DOCUM A17128	li				
BRIWOOD ASSOCIATES,	LTD.				DI	II.
Malling Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.		
2740 W. STH AVE. HIALEAH, FL 33010	2740 W. 5TH AVE. HIALEAH. FL 33010		05/30/1984 3a. Date of Last Report 12/09/1996	\$3,300,004.00 5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation	to date:		
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 58-1576515	Applied For Not Applicable		
Zip Country	Zip	Country	Certificate of Status Desired Make check payable to: Dept. o	State (See reve	\$8.75 Additional Fee Required	on)
9. Name and Address o	of Current Registered Agent		10, If changed, new Register			
SCHENK, HAROLD 2740 WEST 5 AVENUE HIALEAH FL 33010		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code				
for the purpose of changing its ringisterior agent. I am familiar with, and accept the instance of the standard Agent Accepting Appoint A GENERAL PARTNER 1	0.1001 and 620.192, Florida Statutos, the above-name of office or registered agent, or both, in the State of Florobligations of section 620.192, Florida Statutos. Idment) THAT IS A CORPORATION, I MUST BE REGISTERED AN	rida. Such change was	authorized by its general partner(s). I he DATE RTNERSHIP OR OTHE	reby accept the	appointment of registered	b
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Be			11c.	Registration/ Document Number	\dashv
HAIKEN, MARK B.	18 LINDEN STREET	1	REAT NECK NY //02/			1200,000
•			5:00002 -10/0 *****	72 1 3° 72 7 - 01 74 , 25	9152 047019 *****541.25	000000
•			dee	``		
12. I do hereby certify that the information supple Corporations from any liability of non-complete.	Y NOT be changed on this form oliced with this filing is relumbably furnished and doos no ligance with Section 19.07(3)(k) in the event flust the in hat my signatury shall have the same legal effects as not by chapter PO. Florida flatutes	of qualify for the exempt	ion stated in Section 119.07(3)(k), Florida eemed exempt from public access. I furt	Statutes. I relea	ase the Division of e information indicated o	ın

Daytime Telephone Number 57