


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

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership MIAMI DECO LIMITED PARTNERSHIP 1985 B-2		1a. DOCUMENT # A19031	
Mailing Address % ARTHUR B. MALMAN 152 W 57TH ST 35TH FLR NEW YORK NY 10019		Principal Office Address % ARTHUR B. MALMAN 152 W 57TH ST 35TH FLR NEW YORK NY 10019	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
		3. Date Formed or Registered 01/31/1985 3a. Date of Last Report 02/11/1997 4. State or Country of Formation FL 6. FEI Number 13-3261640 7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)	
		5a. Capital Contributions as Shown on record. \$1,450,800.00 5b. Amount of Capital Contributions in FLORIDA to date:	

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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9. Name and Address of Current Registered Agent GROSS, SAUL K % STREAMLINE MANAGEMENT 1125 WASHINGTON AVE. MIAMI BEACH FL 33139		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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 _____			
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) DECO MANAGERS, INC. MALMAN, ARTHUR	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1125 WASHINGTON AVE. 152 W 57TH ST 35TH FL	11b. City, State & Zip Code MIAMI BEACH FL NEW YORK NY 10019	11c. Registration/Document Number P07413 300002292213--9 -09/12/97--01121--018 *****541.25 *****541.25 dce

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. 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

Arthur Malman

DATE

9/2/97

Typed or Printed Name of General Partner Signing Form

ARTHUR MALMAN

Daytime Telephone Number

212-588-3800

CR2E003 (6/97)