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

LIMITED PARTNERSHIP ANNUAL REPORT

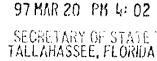
1997



FLORIDA DEPARTMENT OF STATE Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #





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To Country Typ Country Typ Country To Remain and Address of Current Registered Agent Name CCT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Sirect Address (P.O. Box Number is Not Acceptable) Solite, Apt. #, etc. City FL Zip Code City FL Zip Code To 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 for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment for the purpose of changing its registered agent accept the abligations of section 620.192, Florida Statutes. GNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 1. Name(s) of General Partner(s) 11a. (po NOT Use Post Olite Box Numbers) MAE VENTURES, INC. ONE INSIGNIA FINANCIA GREENVILLE SC F920000000	
9. Name and Address of Current Registered Agent 10. If changed, new Rogistered Agent/Office CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Suite. Apt. #, etc. City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code Roman Lam familiar will, and accept the obligations of socion 620.192, Florida Statutes. GNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 1. Namo(s) of General Partner(s) ONE INSIGNIA FINANCIA GREENVILLE SC F920000000	5 Additional Required
OR. Purevant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-hambel limited partnership organized or registered under the laws of the State of Florida, submits 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 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 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 agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. **CREATER HAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.** **A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.** **In Namo(s) of General Partner(s)** **In Namo(s) of General Partner(s)** **In Namo(s) of General Partner(s)** **ONE INSIGNA FINANCIA** **GREENVILLE SC** **F92000000**	
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Note Seneral partners MAY NOT be changed on this form; an amendment must be filed to change a general	al partner.
12. Ide 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 Divided Proposed Prop	mation indicated o