

FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

97 FEB 18 AM 10:21



1. Name of Limited Partnership	1a. DOCUMENT # A22774
MIG - OAK RAMBLE ASSOCIATES LIMITED PARTNERSHIP	

Mailing Address 300 EAST LONG LAKE ROAD SUITE 300 BLOOMFIELD HILLS MI 48304	Principal Office Address 300 EAST LONG LAKE ROAD SUITE 300 BLOOMFIELD HILLS MI 48304
2. Mailing Address 10 West Long Lake Road	2a. Principal Office Address 10 West Long Lake Road
Suite, Apt. #, etc. Suite 10	Suite, Apt. #, etc. Suite 10
City & State Bloomfield Hills, MI	City & State Bloomfield Hills, MI
Zip 48304	Zip 48304

3. Date Formed or Registered 06/20/1986	5a. Capital Contributions as Shown on record. \$1,970,000.00
3a. Date of Last Report 10/18/1995	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation MI	
6. FEI Number 38-2682167	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See statute and fee information) 541.25	

9. Name and Address of Current Registered Agent CHRISKEN REAL ESTATE MANAGEMENT CO. 14627 GRENADINE DRIVE TAMPA FL 33613
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10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
State 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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
ACQUEST REALTY ADVISORS, INC	300 E. LONG LAKE RD., 10 West Long Lak Rd	BLOOMFIELD HILLS MI 4 Bloomfield Hills MI 48304	F92000000721
			100002099141--9 -02/26/87--01121--012 ***541.25 ***541.25 KWM

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 effect 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 David G. Ong DATE 2/13/97

Typed or Printed Name of General Partner Signing Form David G. Ong Daytime Telephone Number 810-645-5130

CR2E003 (11/96)