FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a-DOCUMENT#

1200 OCEAN ASSOCIATES, LTD.

FILED 62//12/99

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SECRETARY OF STATE TALLAHASSEE FLORIDA



| | | | | 8 83 ftt 9 9 8 5 3 8 6 6 6 6 65 |
|---|---|--|---|---|
| Mailing Address 103 GREENE STREET NEW YORK NY 10012 | Principal Office Address 103 GREENE STREET NEW YORK NY 10012 | | 3. Date Formed or Registered 07/03/1986 3a. Date of Last Report 12/29/1997 | 5a. Capital Contributions as Shown on record. \$60,000.00 5b. Amount of Capital Contributions in FLORIDA |
| 2. Mailing Address | 2a. Principal Office Address | 2a. Principal Office Address | | to date: |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | Applied For Not Applicable |
| City & State | City & State | | | \$8.75 Additional |
| Zip Country | Zip | Zip Country | | Fee Required tate (See reverse side for fee information) |
| 9. Name and Address of Current Registered Agent | | | 10. If changed, new Registered Agent/Office | |
| MARLO COURTNEY 640 OCEAN DRIVE MIAMI BEACH FL 33139 | | Name | | |
| | | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | Suite, Apt. #, etc. | | |
| | | City Zip Code | | |
| 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 pariner(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) | Address of Each General (Do NOT Use Post Office Box | Partner 11b | City, State & Zip Code | 11c. Registration/ Document Number |
| PARK 1200, INC. | 103 GREENE STREET | | SOOO27 -01/14, ****50 | M34586 7 4 2 1 1 9 8 /99 - 01089 - 016)8.75 *****508.75 |
| 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 samplegal effects as invade under cath. 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 DATE /2/17/68 | | | | |
| Typed or Printed Name of General Partner Signing Form KICHALD A. GOLSMAN Daytime Telephone Number | | | | |