

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 26 PM 2:59 H 1/8

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership Cornerstone Center, Ltd.		1a. DOCUMENT # A24530	
Mailing Address 1320 S. Dixie Hwy, Suite 1001 Coral Gables, FL 33146		3. Date Formed or Registered 5/15/1987	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3a. Date of Last Report 12/96	
2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		4. State or Country of Formation FL	
		5a. Capital Contributions as Shown on record 500,000	
		5b. Amount of Capital Contributions in FLORIDA to date	
		6. FEI Number 59-2800483	
		7. Certificate of Status Desired	
		8. Make check payable to: Dept. of State (See reverse side for fee info.)	

9. Name and Address of Current Registered Agent Farbish, Howard J. 1320 S. Dixie Hwy #1001 Coral Gables, FL 33146		10. I 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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration Document Number
Berman, David M.	1320 S. Dixie Hwy	Coral Gables, FL 33146	
Swickaw, Bernard	1320 S. Dixie Hwy	Coral Gables, FL 33146	
Stahl, Harvey H.	4304 Place LeManes, Lutz, FL	33549	
Farbish, Howard J.	1320 S. Dixie Hwy	Coral Gables, FL 33146	
Millhauser, Howard P.	1570 madruca Ave	Coral Gables, FL 33146	

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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 included in 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, receive-empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE _____ DATE 12/24/97
 Typed or Printed Name of General Partner Signing Form HOWARD J. FARBISH GR Daytime Telephone Number 305-665-5303