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

	ON HOR AND BOOK [ CASSEL ]			
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEI'ARTMENT Sandra B. Mo-al Secretary of Sta DIVISION OF CORPOR	i <del>e</del>	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 APR -5 PM 3: 29	
1. Name of Limited Partnership	1a. DOCUMENT A31497	Τ#	5 VIII 5 E J	
SHW, LTD.				
Mailing Address	Principal Office Address	3. Date Formed or F	Registered 5a. Capital Contributions as	
		05/02/1991	5a. Capital Contributions as Shown on record	
-NEW-YORK-NY 10017-			\$2,393,264.23	
		12/29/1997	Contributions in FLORIDA	
2. Malling Address	2a. Principal Office Address	4. State or Country o		
275 Madison Avenue - Su Suite, Apt. #, etc.	ite 1511 Suite, Apt. #, etc	FL 6. FEI Number		
New York, NY City & State	City & State	58-195051	Applied For Not Applicable	
10016-1101 USA	7-	7. Certificate of State	s Desired \$8.75 Additional Fee Required	
Zip Country	Zip Count		ble to Dept. of State (See reverse side for fee information)	
		40 600		
9. Name and Address of Current Registered Agent Name			new Registered Agent/Office	
SIM, MICHAREL P., ESQ.	Stree	el Address (P.O. Box Number Is Not Acido	##USSSTIFT5	
76 MILLIEN & MANLESS, F.A.			-04/09/9901043019	
4800 N. FEDERAL HWY., SUITE 300B  BOCA RATON FL 33431		a, Apt #, etc	****437.50 ****437.50	
500X 1011011 / E 50151	City		FL MY	
	gistered agent, or both, in the State of Florida. Such		the laws of the Stale of Florida, submits this statement thor(s). I hereby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)			DATE	
A GENERAL PARTNER THAT MUST	IS A CORPORATION, LIMIT FBE REGISTERED AND AC	TED PARTNERSHIP O CTIVE WITH THIS OFF	R OTHER BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General Partne (Do NOT Use Post Office Box Numb		Code 11c. Registration/ Document Number	
TEQUESTA LAND DEVELOPMENT, I	666 THURD AVENUE, SUI- 275 Madison Avenu - Suite 1511	e   =- NEW YORK NY 4003 New York, NY 10016-110		
700028 -04/09/9 *****88	9+-01043016		•	
Note: General partners MAY NOT	be changed on this form; an	amendment must be fil	ed to change a general partner.	
12. I do hereby certify that the information supplied with thi Corporations from any liability of non-compliance with 5 this annual report is true and accurate and that my sign empowered to execute this report as required by chapt SHW, LTD	Section 119.07(3)(k) in the event that the information nature shall have the same legal effects as if made i	n supplied is deemed exempt from public a		
SIGNATURE	<i>EMM</i> MY 'arducci, Secretary	/Treasurer	DATE	
Typed or Printed Name of General Partner Signing Form	4WILW M-F.N. CARD	466 Daytime Telephone	Number 212-986-9060	