

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JAN -8 PM 4: 05



1. Name of Limited Partnership 2301 SE 17TH ST., LTD.		1a. DOCUMENT # A93000000159	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
450 E. LAS OLAS BLVD., SUITE 700 FT. LAUDERDALE FL 33301		450 E. LAS OLAS BLVD., SUITE 700 FT. LAUDERDALE FL 33301	
3. Date Formed or Registered 03/05/1993		5a. Capital Contributions as Shown on record \$980,000.00	
3a. Date of Last Report 01/31/1997		5b. Amount of Capital Contributions in FL ORIDA to date \$980,000.00	
4. State or Country of Formation FL		6. FEI Number 65-0407836 <input type="checkbox"/> Applied For <input 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 reverse side for fee information)	

9. Name and Address of Current Registered Agent GARDINA, CAROL J 450 E. LAS OLAS BLVD., SUITE 700 FT. LAUDERDALE FL 33301		10. If changed, now Registered Agent/Office Name AMERICAN INFORMATION SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) ONE S.E. 3rd AVENUE Suite, Apt. #, etc. 27th FLOOR City MIAMI Zip Code FL 33131	
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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) *Marla R. Mayster* Marla R. Mayster DATE 12/31/97

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) 2301 MGT, LTD.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 450 E. LAS OLAS BLVD.	11b. City, State & Zip Code FT. LAUDERDALE FL 333	11c. Registration/Document Number A93000000686 300002398743--8 -01/13/98--01087--008 ****541.25/****541.25
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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 indicated on 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, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *William M. Pierce* DATE 01/05/97
Typed or Printed Name of General Partner Signing Form WILLIAM M. PIERCE - Vice President Daytime Telephone Number 954-712-1300

CR2E003 (6/97)