

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

A9300000778

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN 30 PM 4:15

1. Name of Limited Partnership

1a. DOCUMENT #
A9300000778

711 Washington Avenue Limited Partnership

OK 1/30/97

Mailing Address
c/o Arnaud Brunel
1501 - 3rd Avenue
4th Floor
New York, NY 10028

Principal Office Address

same

3. Date Formed or Registered

7/29/93

5a. Capital Contributions as Shown on record.

\$7,500.00

3a. Date of Last Report

7/26/96

5b. Amount of Capital Contributions in FLORIDA to date.

\$7,500.00

2. Mailing Address

2a. Principal Office Address

4. State or Country of Formation

Florida

6. FEI Number

13-3726557

Applied For
 Not Applicable

7. Certificate of Status Desired

\$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

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

10. If 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)

711 Washington Avenue
Corporation

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

c/o Arnaud Brunel
1501 - 3rd Avenue
4th Floor

11b. City, State & Zip Code

New York, NY 10028

11c. Registration/Document Number

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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

Arnaud Brunel

DATE

1/17/97

Typed or Printed Name of General Partner Signing Form

Arnaud Brunel

Daytime Telephone Number

212-327-2565

CR25003 (6/96)