FILED

03 MAY -5 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A93000001344

1. Entity Name
BISCAYNE APARTMENTS ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
2000 S. COLORADO BLVD., TOWER TWO SUITE 2-1000 DENVER, CO 80222	2000 S. COLORADO BLVD., TOWER TWO SUITE 2-1000 DENVER, CO 80222

2. Principal Place of Business	3. Mailing Address
2828 CORAL WAY	2828 CORAL WAY
Suite, Apt. #, etc. PENTHOUSE SUITE	Suite, Apt. #, etc. PENTHOUSE SUITE
City & State MIAMI FL	City & State MIAMI, FL
Zip 33145 Country	Zip 33145 Country

DUE BY MAY 1, 2003

4. FEI Number: 65-0405981 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, required if named agent is changing, or authorized person signing on behalf of agent

9. Capital Contributions as Shown on record: $1,082,796.00	10. Amount of Capital Contributions in FLORIDA to date	11. MAKE CHECK PAYABLE TO FL DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	A93000001343	STREET ADDRESS	
NAME	RELATED/GMN BISCAYNE, LTD.	CITY-ST-ZIP	
STREET ADDRESS	2000 S. COLORADO BLVD., TOWER TWO		
CITY-ST-ZIP	DENVER, CO 80222		
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NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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CR2E003 (10/02)

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: _____ ANGEL HERNANDEZ VICE - PRESIDENT 4/11/03
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL GENERAL PARTNER — Date — Daytime Phone #