## **FILE ON OR BEFORE APRIL 8.1998 TO AVOID REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

SECRETARY OF STATE DIVISION OF CORPORATIONS

Secretary of State 1998 98 MAR 20 AM 11: 47 DIVISION OF CORPORATIONS **DOCUMENT#** 1. Name of Limited Partnership A94000000823 BEACON INDUSTRIAL/TFI, LTD. 58. Capital Contributions as Shown on record. Principal Office Address 3. Date Formed or Registered Malling Address 06/20/1994 667 MADISON AVENUE, 67H FLOOR 687 MADISON AVENUE, BTH FLOOR \$11,389,887.00 NEW YORK NY TUUZY **NEW YORK NY 160**21 38. Date of Last Report 01/07/1997 5b. Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address 11 389 887.00 655 MADISON AVENUE 655 MADISON AVENUE Suite, Apt. #, etc 6. FEI Number 8TH FLOOR Applied For 8TH Floor 58-2117272 Not Applicable City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip 8. Make check payable to: Dept. of State (See reverse side for fee information) USA 10021-8043 10021-8043 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name GRAGG, K. LAWRENCE Street Address (P.O. Box Number Address (P.O. C/O WHITE & CASE -03/23/98--01124--018 200 SOUTH BISCAYNE BLVD., SUITE 4900 Suite, Apt. #, etc \*\*\*\*526.25 \*\*\*\*526.25 MIAMI FL 33131 City Zip Code 10a. Pursuant to the provisions of sections 620.1051 and 620.1051 and 620.1051, 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. StGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ Document Number 11. Name(s) of General Partner(s) City, State & Zip Code 11c. BEACON INDUSTRIAL/TFI, INC. 867 MADISON AVENUE-8 NEW YORK NY 10021 P94000030453 655 MADISON AVENUE

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), Fiorida 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 perjuired by chapter 620, Florida Statutes.

SIGNATURE .

BEACON INDUSTRIAL/TELLES, G. P. THOMAS M. STRINGER, V.P.

DATE 3/16/97

hone Number (3/2) 521-2805