

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 -2 AM 10: 03

1. Name of Limited Partnership WEST BRICKELL APARTMENTS, LTD.	1a. DOCUMENT # A94000001002
---	---------------------------------------



Mailing Address 25 S.E. 2ND AVENUE, SUITE 828 MIAMI FL 33131	Principal Office Address 25 S.E. 2ND AVENUE, SUITE 828 MIAMI FL 33131	3. Date Formed or Registered 07/25/1994	5a. Capital Contributions as Shown on record. \$7,012,987.00
		3a. Date of Last Report 01/10/1997	5b. Amount of Capital Contributions in FLORIDA to date:
		4. State or Country of Formation FL	
2. Mailing Address <i>2928 CORAL WAY</i> Suite, Apt. #, etc. <i>Suite 828</i> City & State <i>MIAMI FL</i> Zip Country <i>33145</i>	2a. Principal Office Address <i>2928 CORAL WAY</i> Suite, Apt. #, etc. <i>Suite 828</i> City & State <i>MIAMI FL</i> Zip Country <i>33145</i>	6. FEI Number 65-0941544	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired <input checked="" 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 FOSMOEN, RICHARD 25 S.E. 2ND AVENUE, SUITE 828 MIAMI FL 33131
--

10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) <i>2928 CORAL WAY</i> Suite, Apt. #, etc. <i>Suite 828</i> City <i>MIAMI</i>	Zip Code FL 33145
---	-----------------------------

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
NEW WORLD CENTER FOUNDATION,	25 S.E. 2ND AVENUE, S	MIAMI FL 33131	748883

300002407533--3
 -01/21/98--0090--005
 *****550.00 *****550.00

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 <i>Richard Fosmoen</i> Typed or Printed Name of General Partner Signing Form RICHARD FOSMOEN	DATE 12/29/97 Daytime Telephone Number 305 359 3627
--	--

CR2E003 (6/97)