FILE ON OR BEFORE APRIL 8,1998 TO AVOID REVOCATION AND \$500 PENALTY FEE

FLORINA DEPARTMENT DE STATE 98 APR 29 PM 2: 23 **DOCUMENT#** Name of Limited Partnership A95000000133 EYR LIMITED Malling Address Principal Office Address 3. Date Formed or Registered 58. Capital Contributions as Shown on record. C/O GEIGER. KASDIN. ET AL 01/26/1995 C/O GEIGER, KASDIN, ET AL \$500,000.00 1428 BRICKELL AVENUE, 6TH FLOOR 1428 BRICKELL AVENUE, 6TH FLOOR 38. Date of Last Report MIAMI FL 33131 MIAMI FL 33131 02/10/1997 **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Malling Address 2a. Principal Office Address 5th AVE FL AVE 2324 Nu 2324 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For 65-0518802 Not Applicable City & State City & State <u>-</u>(MAAH FL UIANI 7. Certificate of Status Desired \$8.75 Additional Country 33127 33127 Make check payable to: Dept. of State (See reverse side for fee information) A. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office KASDIN, NEIGEN O-C/O GEIGER, KASDIN, ET AL 1428 BRICKELL AVENUE, 6TH FLOOR **MIAMI-FL 33131** Pursuant to the provisions of sections 620,1051 and 620,192, Florida 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 agen State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am lamiliar with, and accept the obligations of section 620. -01**1** SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ Document Number 11. Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. 1428 BRICKELL AVE., 6 EYR CORPORATION **MIAMI FL 33131** P94000035890 REMISTATEMEN

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 filling 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

SIGNATURE ____

empowered to execute this report as required by chapter 620. Florida Statutes

DATE 04/27/98