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

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



ARGYLE VILLAGE SQUARE SHOPPING CENTER LIMITED PA

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1.	Name	of Limite	d Partner	ehin
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DIVISION OF CORPORATIONS

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RINERSHIP	an-Ar _{cm}			
Malling Address 4902 EISENHOWER BLVD., SUITE 380	Principal Office Address 4902 EISENHOWER BLVD., SUITE 380	3, Date Formed or Registered 02/08/1995	5a. Capital Contributions as Shown on record. \$5,600,100.00	
TAMPA FL 83634	TAMPA FL 33634	3a. Date of Last Report 01/22/1996		
		01/22/1890	5b. Amount of Capital Contributions in FLORIDA	
		4. State or Country of Formation	to date:	
2. Mailing Address	2a. Principal Office Address	FL.	\$5,600,100.00	
Suite, Apt. #, etc.	Sulte, Apt. #, etc.	6. FEL Nymber 65-0559523	Applied For Not Applicable	
City & State	City & State			
		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zip Country		 	
		 Make check payable to: Dept. of 	of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent	10. If change	d, new Registered Agent/Office
EURO AMERICAN MANAGEMENT INC.	Name	
4902 EISENHOWER BLVD., SUITE 380	Street Address (P.O. Box Number Is Not Acc	ceptable)
TAMPA FL 33634	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 _ 11~6~9

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
EURO VII, INC.	4902 Eisenhower Blvd. Suite 380	OORAL SPRINGS FL 3306 → Tampa, FL 33634	P95000002092
		-12/05/9	210697 601063019 .25 ****576.25

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 parequired by chapter 620, Florida Statutes.

SIGNATURE -

Typed or Printed Name of General Fartner Signing Form

Eric E. E. Bessem, President

___ Daytime Telephone Number

(813) 249-0559

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