

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A96000001894

DIM-EMBASSY LIMITED PARTNERSHIP

Mailing Address 1650 S.E. 17TH STREET, SUITE 310 FT LAUDERDALE FL 33316-1735	Principal Office Address 1650 S.E. 17TH STREET, SUITE 310 FT LAUDERDALE FL 33316-1735	3. Date Formed or Registered 10/08/1996	5a. Capital Contributions as Shown on record \$6,000,000.00
2. Mailing Address One financial Plaza Suite 2001 City & State Fort Lauderdale FL Zip 33344 Country USA	2a. Principal Office Address One Financial Plaza Suite 2001 City & State Fort Lauderdale FL Zip 33394 Country USA	3a. Date of Last Report 09/15/1997	5b. Amount of Capital Contributions in FLORIDA to date:
		4. State or Country of Formation FL	6. FEI Number 65-0689372
		7. Certificate of Status Desired <input 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 DANE, JAN W 1650 S.E. 17TH STREET, SUITE 310 FT LAUDERDALE FL 33316-1735	10. If changed, new Registered Agent/Office Name Dane, Jan W. Street Address (P.O. Box Number Is Not Acceptable) One Financial Plaza Suite 2001 City Fort Lauderdale. Zip Code FL 33394
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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

10/26/98

**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) DIM-EMBASSY, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1650 S.E. 17TH STREET One Financial Plaza Suite 2001	11b. City, State & Zip Code FT LAUDERDALE FL 33316 33394	11c. Registration/ Document Number P96000075735 900002741909--3 -01/14/99-01078-010 ****526.25 ****526.25
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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

DATE 10/26/98