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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** 1a.

FILED 98 OCT 29 PH 1: 11

STATE

Daytime Telephone Number (561) 368-1113

	A9600001937		SECRETARY UT STATE TALLAHASSEE. FLORIDA				
LEHMAN INVESTMENTS, LTD.							
Mailing Address	Principal Office Address			3_ Date Formed or Registered	5a. Capit	al Contributions as n on record.	7
230 N.W. 29TH STREET MIAMI FL 33127	230 N.W. 29TH STREET MIAMI FL 33127		10/16/1996 \$1,700,000.00  3a. Date of Last Report 01/02/1998 5b. Amount of Capital Contributions in FLO to date:				
					nt of Capital butions in FLORIDA		
2. Mailing Address 2600 N. Military Trail	2a. Principal Office Address			FL			
Suite, Apt. #, etc. Suite Z70	Suite, Apt. #, etc.			6. FEI Number	Applied For		
City & State Raton, F1.	City & State			65-0708121 7. Certificate of Status Desired	Not Applicable  \$8.75 Additional		
33431 Country USA	Zip Country				Fee Required  of State (See reverse side for fee information)		
			!				$\exists$
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office					
LEHMAN, RICHARD S		E000025789059					╛
2600 N. MILITARY TRAIL, SUITE 270		Street Address (P.O. Box Number Is Not Acceptable) 1/03/9801040013					
BOCA RATON FL 33431		Suite, Apt. #,	Suite, Apt. #, etc. #未来完全6。25 米米米米5c			****526.25	7
			City 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 diffice 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 (Do NOT Use Post Office 80)		11b.	City, State & Zip Code	11c.	Registration/ Document Number	]
BJR INVESTMENT CORP.	230 N.W. 29TH STREET		MIAMI FL 33127		CRZE003 (8/98)		
The state of the s				. Kta.	(PL )	)CT 3 b 2224	1
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							