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

Typed or Printed Name of General Partner Signing Form

LIMITED PATINE SHIP NIVLE PORT 99	FLORIDA DEPARE dra M cretary IS CO	~	3		SÉC TALL	97
1. Name of Limited Partnership	1a. DOCUMENT # A96000002323			FIL FEB -5 AHASSEE		
AMIEL PROPERTIES, LTD.	\$ 541.25-FF			ED PH 4: 1		
Mailing Addross	Principal Office Address		3. Date Formed or Registered	58. Capita Contributions as Shown on record		
	CM			12/16/96 3a. Date of Last Report	\$511,000.00	
2. Mailing Address	2a. Principal Office Address			N/A 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date.	
3201 Lenox Road	3201 Lenox Road			Florida	\$511,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number Applied For		
Suite 42 City & State	Suite 42 City & State					Not Applicable
Atlanta, GA	Atlanta, GA			7. Certificate of Status Desired		\$8.75 Additional Fee Required
Zip Country U.S.		Country J.S.		8, Make check payable to: Dept. o	l State (See reve	
9, Name and Address of Current Registered Agent Name			10, II changed, new Registered Agent/Office			
			Address (P.O. Box Number Is Not Acceptable)			
Palmetto Charter Services, Inc. Street Address 150 Magnolia Ave.			ress (P.U. B	ox number is not acceptable)		
Daytona Beach, FL 32114	Suite, Apt. #, etc.		#, etc.			
<u>-</u>	City		FL Zip Code			
10a. Pursuant to the provisions of sections 620 1051 and 63 for the purpose of changing its registered office or reg agent. I am familiar with, and accept the obligations of	istered agent, or both, in the State of Flori					
SIGNATURE (Registered Agent Accepting Appointment)				DATE		
A GENERAL PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED ANI	IMITED CACTIV	PART E WIT	NERSHIP OR OTHE IH THIS OFFICE.	R BUSIN	NESS ENTITY
11. Name(s) of Goneral Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box	Partner	11b.	City, State & Zip Code	11c.	Registration/ Document Number
Lydia Sarda Amiel	3201 Lenox Road Suite 42			Atlanta, GA 30324 900002 -02/1	2 084 2/970 618.25	6490 1005010 ****541.25
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), 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 eath. 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 Cyclia & Amuels DATE January 14, 1997						
SIGNATURE DATE January 14, 1997 Lydia Sarda Amiel Lydia Sarda Amiel Destine Telephone Number						6-2908

Daytime Telephone Number