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

DOCUMENT# 1a.

FILED

98 DEC 22 PM 4: 30

SECRETARY OF STATE

	A9600002516			TALLAHASSEE, FLORIDA			
PLANTATION TOWNE MALL, LTD.							
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
1655 DREXEL AVENUE. SUITE 208 MIAMI BEACH FL 33139	1655 DREXEL AVENUE. SUITE 208 MIAMI BEACH FL 33139		12/31/1996 3a. Date of Last Report 12/31/1997		\$643,000.00		
			4. State or Country of Form		5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address			643,000.00		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0724819	Applied For Not Applicable		
City & State	City & State			7. Certificate of Status Desired			
Zip Country	Zip Country				\$8.75 Additional Fee Required of State (See reverse side for fee information)		
10 15 10 10 10 10 10 10 10 10 10 10 10 10 10							
9. Name and Address of Current Registered Agent RAPPORT, MORRIS 1655 DREXEL AVENUE, SUITE 208		10. If changed, new Registered Agent/Office					
		Street Address (P.O. Box Number Is Not Acceptable)					
MIAMI BEACH FL 33139	Suite, Apt. #, etc.		etc.	5000027384150- -01/12/9901075016			
		City *****535.UL *****535.UU —					
for the purpose of changing its registered office or regi agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	istered agent, or both, in the State of Florid section 620.192, Florida Statutes.	a. Such change	was auth	orized by its general partner(s). I hereby	accept the appointment o	f registered	
MUST	ARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner.						
11, Name(s) of General Partner(s)			11b.	City, State & Zip Code		it Number	
PLANTATION TOWNE SQUARE, INC	1655 DREXEL AVENUE, S		MIAMI BEACH FL 33139		P95000019691 (96)88)		
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partners MAY NOT be changed on this form; an amendment must be filed to change a general 2. It 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)Kh, Florida Statutes. I release Corporations from any liability of non-compliance with Section 119.07(3)(Kh) in the event that the information supplied is deemed exempt from public access. I further certify that I am a General Partner of the limited partner empowered to execute this report as required by chapter 620, Florida Statutes. **PLANTATION** TOWNE SOUR KE, INC **SIGNATURE** DATE DATE					atutes. I release the Division	partner.	
Typed or Printed Name of General Partner Signing Form		*		Daytime Telephorie Number			