FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP 'ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT # **A9700000326**

FILLE SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR 15 AM 9: 13



| Mailing Address Principal Office Address 3. Date Formed or Registered 527 capital Catal Duties at 98 C/O LOEB PARTNERS REALTY 0/05/1997 5.137.00.00 | | 710100000020 | | | | |
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| Rey YORK NY 10175 Section Secti | ID ASSOCIATES, LTD. | | | 1 188169, 1914 1914 1961 9615 | #3/11 | |
| Rey YORK NY 10175 Section Secti | Malling Address | Principal Office Address | | 3. Date Formed or Registered | 50. Copyral Contributions and | |
| 2g. Mailing Address 2g. Principal Office Address 2g. Principal Office Address 5s. 127, 000.00 5sulte, Apt. 4, etc. 5unty 6 State City 6 | C/O LOEB PARTNERS REALTY 521 FIFTH AVENUE, SUITE 2300 MEN YORK MY 10175 | 521 FIFTH AVENUE, SUITE 2300 | | | 5,127,000.00 | |
| 2. Mailing Address 2. Principle Office Address 5. 127,000.00 5. Suite, Apt. #, etc. 5. Suite, Apt. #, etc. 5. Suite, Apt. #, etc. 6. FEIN, mbbs* 13–3931361 2 Applied For Not Applied by To. Country 7. Country 7. Country 7. Country 8. Safe Additional Fee Regulated 8. Make check payable to: Dept. of State (See reverse side for fee information of the safe of the safe of the information of the safe of the safe of the information of the safe of the safe of the information of the safe of the safe of the information of the safe of the safe of the safe of the information of the safe o | TEST LOTIN (II IVII) | HEN TORK NO TOLES | | | Contributions in FLORIDA | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State To Country To Coun | 2. Mailing Address | 2a. Principal Office Address | | ¦ | | |
| City & State Zip Country Zip Country Zip Country Zip Country To Country | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6, FEI Number | Applied For | |
| Present Address of Current Registered Agent 10, It changed, now Registered Agent/Office | City & State | City & State | | | Not Applicab | |
| 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Sure. Apt. 4. etc City FL 2ip Code The purpose of changing its registered office or registered agent, or both, in the State of Florida. Statutes be above-named limited partnership organized or registered under the leve of the State of Florida. Statutes be gent 1 am familiar with, end accept the obligations of section 020 192, florida Statutes Signature: (Registered Agent Accepting Appointment) 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 Sent. General Partner (Ite NOT Use Post Office Box Numbers) 11b. City, State 6-Zip Code 11c. Registration/ Document Number P070000011478 P070000011478 D01/14/93—01038—006 ********************************** | Zip Country | 7φ | Country | | Fee Required | |
| ROSEN, LAWRENCE N 2925 AVENTURA BLVD., SUITE 308 AVENTURA FL 33180 FL Zip Code City FL Zip Code Ci | | | | 8. Make check payable to: Dept. o | of State (See reverse side for fee infor | |
| Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable in Acceptable of Incides, state | | | 10. If changed, new Registered Agent/Office | | | |
| AVENTURA FL 33180 Suite, Apt. #, etc. City FL Zip Code FL Zip | | | Name | | | |
| City FL Zip Code 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, authritis this statement for the purpose of changing its 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 IGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 1. Name(s) of General Partner(s) 11a. Address of Each General Partner 11b. City, State & Zip Code 11c. Registration/Decument Number LOEB INTERNATIONAL DRIVE, IN 521 FIFTH AVENUE, SUI NEW YORK NY 10175 P97000011478 DDDDDD24 DD33D - 3 -01/14/38 - 0103B - 006 ********************************** | 2925 AVENTURA BLVD., SUITE 308 | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| OB. Pursuant to the provisions of sections 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 registere agent. I am familiar with, and accept the obligations of section 620,192, Florida Statutes. A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 1. Name(s) of General Partner(s) 11a. Address of Section General Partner(s) 11b. City, State & Zip Code 11c. Registration/Decument Number LOEB INTERNATIONAL DRIVE, IN 521 FIFTH AVENUE, SUI NEW YORK NY 10175 P97000011478 DDDDD24DD33D3 -01/14/9801098006 *******541.25 ********541.25 | AVENTURA FL 33180 | Suite, Apt. # | | #, etc. | | |
| Oa. Pursuant to the provisions of sections 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 registeres agent. I am familiar with, and accept the obligations of section 620-192, Florida Statutes. A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Name(s) of General Partner(s) 11a. Address of Each General Partner (TOX NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Decument Number | | City | | | Zip Code | |
| LOEB INTERNATIONAL DRIVE, IN 521 FIFTH AVENUE, SUI NEW YORK NY 10175 P97000011478 D000024003303 -01/14/9801098-006 *****541.25 WHYORK NY 10175 P97000011478 | for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the change of the control of the change of the cha | corregistered agent, or both, in the State of Fiderics of section 620,192, Florida Statutes AT IS A CORPORATION, | orida. Such chango | was authorized by its general partner(s). The | reby accept the appointment of regis | |
| LOEB INTERNATIONAL DRIVE, IN 521 FIFTH AVENUE, SUI NEW YORK NY 10175 P97000011478 10000024003303 -01/14/9801038006 *****541.25 W. W | 1. Name(s) of General Partner(s) | 11a. Address of Each Gener | al Pertner lox Numbers) | 1b. City, State & Zip Code | | |
| -01/14/3801038006 ****541.25 | LOEB INTERNATIONAL DRIVE, IN | | | NEW YORK NY 10175 | P97000011478 | |
| Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. | | | | 0000024003303 -01/14/9801038006 ****\$541.25 ****\$41.25 | | |
| Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. | A PARLIL A PRIMA A A A | | | | JR4-27 | |
| | Note: General partners MAY No | OT be changed on this form | n; an amen | dment must be filed to ch | ange a general partn | |

Corporations from any final from public access. I further certify that he middled on this annual report is true and accurate another her shall have the same logal effects as if made under oath. I further certify that ham a General Partner of the limited partnership receiver or trustee empowered to execute this report as required by a higher 670, Florida. Statutes.

SIGNATURE ...

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number