

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
99 MAR 22 PM 12:40



1. Name of Limited Partnership LEVAN ENTERPRISES, LTD.	1a. DOCUMENT # A97000001425
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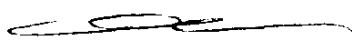
Mailing Address 1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304	Principal Office Address 1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country

3. Date Formed or Registered 06/27/1997	5a. Capital Contributions as Shown on record \$12,501,000.00
3a. Date of Last Report 12/05/1997	5b. Amount of Capital Contributions in FLORIDA to date. \$5,000,000.00
4. State or Country of Formation FL	6. FEI Number 65-0891608 <input checked="" type="checkbox"/> APPLIED FOR <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input checked="" 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 MILER, ALISON W 150 WEST FLAGLER STREET MUSEUM TOWER, SUITE 2200 MIAMI FL 33130
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10. If changed, new Registered Agent/Office Name: ALAN B. LEVAN Street Address (P.O. Box Number Is Not Acceptable): 1750 E. SUNRISE BLVD. Suite, Apt. #, etc.: City: Ft Lauderdale FL Zip Code: 33304
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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.

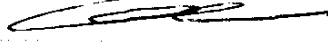
SIGNATURE (Registered Agent Accepting Appointment):  DATE: 2/22/99

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 Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
LEVAN GENERAL CORP.	1750 EAST SUNRISE BLV	FT. LAUDERDALE FL 333	P97000052575
			*****88.75 *****88.75 *****446.25 *****446.25

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 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:  , President DATE: 2/22/99

Typed or Printed Name of General Partner Signing Form: ALAN B. LEVAN Daytime Telephone Number: 954-766-3020

CR2E003 (12/98)