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

Sands. s. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED 99 FEB 19 PH 2: 02

1. Name of Limited	Name of Limited Partnership 1a. DOCUMENT# A9700001466		SECKETA TALLAHA	Nor Opisyana SSEE, FLORIDA		
FASHION MALL PARTNERS, LTD.						
Mailing Address		Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record	
875 N. MICHIGAN A	875 N. MICHIGAN AVE . #3620 875 N. MICHIGAN AVE . #3620			06/30/1997		
CHICAGO IL 60611 CHICAGO IL 60611 2. Mailing Address 2a. Principal Office Address				Ja. Dale of Last Report		
				12/31/1997	5b. Amount of Capital Contributions in FLORIDA	
			4. State or Country of Formation	n to date:		
	Mailing Address		FL	1,000.		
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 65-0762.4	Applied For Not Applicable		
	<u>-</u>			7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip	Country	Ζίρ	Country	8. Make check payable to Dept	of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent				10. If changed, new Regis	lered Agent/Office	
MANSUR, E. I	BARRY		Name			
1117 SCHEFFLERA DRIVE CAPTIVA FL 33924			Street Address (P.O. Box Number Is Not Acceptable)			
			Suite, Apl #, etc			
			City FL Zip Code			
for the purpo agent. I am t SIGNATURE (Registe	ose of changing its registered office familiar with, and accept the obligat ered Agent Accepting Appointment)	or registered agent, or both, in the State of Flo tions of section 620.192, Florida Statutes	rida Such chan	PARTNERSHIP OR OTH	preby accept the appointment of registered	
11, Name(s) o	of General Partner(s)	11a. Address of Each General A	at Dada as	11b. City, State & Zip Code	11c. Registration/	
		875 N. MICHIGAN AVE.,		CHICAGO IL 60611	F97000003398	
				-03/	27913071 01/8901153004 *141.25 ****141.25	
				5~ 24-99		
<u> </u>						
				endment must be filed to o		
Corporations fr this annual rep	om any liability of non-compliance t	with Section 119.07(3)(k) in the event that the ii y signature shall have the same legal effects as	nformation supp	exemption stated in Section 119 07(3)(k). Flori- illed is deemed exempt from public access. I fur oath. I further certify thal I am a General Parine	ther certify that the information indicated on	
		- 1				

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NATURE Lobot C. Calutt

DATE__12/29/98

Typed or Printed Name of General Partner Signing Form Robert Corbett, Treasurer Daytime Telephone Number (312) 263-2400