FILE UN UN BEFUNE DECEMBEN 31, 1997 UN FANTMENSHIP WILL DE SUDJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A97000001896

98 FEB 16 AM 9: 11

305-626-4600

G & E Realty Holdings, Ltd.					
			malia	1	
Mailing Address 1505 N.W. 167th Street 4th Floor Miami, Florida 33169	Principal Office Address 1505 N.W. 167th Street 4th Floor Miami, Florida 33169		3. Date Formed or Registered 9/3/97 38. Date of Last Report N/A	5a. Capital Contributions as Shown on record. 5, 600, 000.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 1505 N.W. 167th Street	2a. Principal Office Address 1505 N.W. 167th Street		4. State or Country of Formation Florida	5,600,000.	
Suite, Apt. #, etc. 4th Floor	Suite, Apt. #, etc. 4th Floor		6. FEI Number 65-0777957	Applied For Not Applicable	
City & State Miami Florida	City & State Miami Florida		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country 33169 USA	Zip 33169 Country USA		Re Required 8. Make check payable to: Dept. of State (See reverse side for fee information)		
9, Name and Address of Current Registered Agent		None	10. If changed new Registered Agent/Office		
G & E Manangement, Inc. 1505 N.W. 167th Street Miami, Florida 33169		Name Street Address (P.O. Box Number Is Not Acceptable)			
MIGHT, PIOLICE 33103		Suite, Apt. #, etc.			
		City		Zip Code	
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 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 Genera (Do NOT Use Post Office Bo	Partner x Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
G & E Management, Inc.	1505 N.W. 167th	E .	ami, Flor33169	P97000075842	
			6000024 -02/19/ ****54	9801071010 .25 ****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 horoby 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

Gordon

and by chapter 600. Florida Statules

Mark J.

required by chapter

Typed or Printed Name of General Partner Signing Form

Communitions 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

al 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