FILE ON OR BEFORE APRIL 8,1998 TO AVOID 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 # **A9700002141**

FILED 98 APR -3 AMII: 01 SECRETARY OF STATE TALLAHASSEE, FLORIDA



DENT THEE CONTINENCIAL P	1 THEE COMMERCIAL PARK I LIMITED 98-PCM				
Mailing Address 1390 BRICKELL AVENUE, STE. 230 MIAMI FL 33131	Principal Office Address 1390 BRICKELL AVENUE, STE, 230 MIAMI FL 33131		3. Date Formed or Registered 10/03/1997 38. Date of Last Report	5a. Capital Contributions as Shown on record. \$72,000.00	
2. Mailing Address	28. Principal Office Address		4. Stale or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date: \$72,000.00	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0734795	Applied For Not Applicable	
City & State Zip Country	Zip Cor			7. Certificate of Status Desired \$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			10. If changed, new Registered Agent/Office		
HABER, ROBERT M 520 BRICKELL KEY DR. SUITE 0-305 MIAMI FL 33131		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code			
10a. Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office of agent. I am familiar with, and accept the obligation of the control of the purpose of changing agent. I am familiar with and accept the obligation of the control of the purpose of th	r registered agent, or both, in the State of Florida. ns of section 620.192, Florida Statutes. TIS A CORPORATION, LIN	Such change was a	uthorized by its general partner(s). I her	by accept the appointment of registered	
11. Name(s) of General Partner(s)	T BE REGISTERED AND A Address of Each General Per (Do NOT Use Post Office Box Nu	riner	City, State & Zip Code	11c. Registration/ Document Number	
BAYSIDE INTERNATIONAL REALTY			IIAMI FL 33131	P93000086576	
			-04/08	482786 1 1/\$301077005 26.25 ****526.25	
Note: General partners MAY NO	T be changed on this form; a	n amendme	ent must be filed to cha	ange a general partner.	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance with	this filling is voluntarily furnished and does not qui	alify for the exemptic	in stated in Section 119.07(3)(k), Florida	Statutes. I release the Division of	

this annual report is true and accurate and that my signature shall have the employed 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 charge 620. Florid Signature

SIGNATURE By:

o, as President of ERNATIONAL REALTY, INC. Davime Telephone Number (305) 381-7790

DATE April 2, 1998