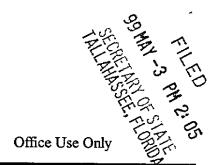
A97000002565

 Ruby Conzalez, CLA Haber, Lewis & Pathman, LLP One Biscayne Tower, Suite 3660 2 South Biscayne Boulevard Miami, FL 33131	3
 City/State/Zip	<u>.</u>



CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.			
	(Corporation Name)	(Document #)	- ,===
2.			
	(Corporation Name)	(Document #)	F 5 4
3.			
	(Corporation Name)	(Document #)	· -,
4.			
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NEW FILINGS		
	Profit	
	NonProfit	
	Limited Liability	
	Domestication	
	Other	

	AMENDMENTS : : : : : : : : : : : : : : : : : : :
	Amendment
	Resignation of R.A., Officer/Director
<u> </u>	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

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OTHER FILINGS	
 Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION -
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

RA Chg.

MAY 1 2 1999

Examiner's Initials

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERD OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Donald J. Kipnis Family Investments, Ltd.		
	Name of limited partners	ships	
2.	November 26, 1997 Date of filing/registration in Florida	A97000002565 Document number assigned	
4. of the	The name of the registered agent and the registered Florida Department of State:	office address as shown on the records	
	B & C Corporate Services, In	nc.	
	201 S. Biscayne Boulevard, Suit	e 3000	
	Miami, FL 33131	1 St. 30 .	
5.	The name and address of the new registered agent a	and/or office:	
	Harold L. Lewis	To De	
	Haber, Lewis, & Pathman, L	LP SE S	
	One Biscayne Tower, Suite 3	660 Pr	
	2 S. Biscayne Boulevard	•	
	Miami, FL 33131		
6. No-	Such change(s) was/were authorized by the general	partners. 4/20/99	
	394 Corp., General Partner	(Date)	
comply duties, docum	y accept appointment as registered agent and agree with the provisions of all statutes relative to the period and I am familiar with accept the obligations of my ent is being filed merely to reflect a change in the regis	proper and complete performance of my position as registered agent. Or, if this tered office address, I hereby confirm that	
	[Signature of Registered Agent]	[Date]	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00