THE CARLA DISE DECEMBER 31, 1995 CARLA TED FARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
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SECRETARY OF STATE PROPERTY OF STATE OF CORPORATION
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Name of Limited Partnership	1a. DUCUMENT A98000000542	7	rn 3: 05			
Miami River Park Associates, Ltd.						
Mailing Address 313 CONGRESS STREET BOSTON MA 02210	Principal Office Address 313 CONGRESS STREET BOSTON MA 02210	Date Formed or Registered 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$99.00			
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	6. FEI Number 65-0816593	Applied For Not Applicable			
Zip Country	Zip Country	7. Certificate of Status Desired 8. Make check payable to: Dept.	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 Reg	jistered Agent	10. If changed, new Registi	ered Agent/Office			
MCDONOUGH, BRIAN J 2200 MUSEUM TOWER	Name Street Ar	dress (P.O. Box Number Is Not Acceptable)	2			
150 WEST FLAGLER STREET	t. #, etc.					
MIAMI FL 33130	City		FL Zip Code			
10a. Pursuant to the provisions of sections 620.1051 and 620 for the purpose of changing its registered office or regist agent. I am familiar with, and accept the obligations of sections.	ered agent, or both, in the State of Fiorida. Such chi					
SIGNATURE (Registered Agent Accepting Appointment)		DA				
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			
GHG Miami River LLC	313 CONGRESS STREET		M98000001396			

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 filling 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 Itability 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 Pertner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

MIAMI RIVER PARK	associates,	LAD. By:	GHC Miami	River LLC,	Its	General	Partner
SIGNATURE	/ 					DATE_	12/8/98

Typed or Printed Name of General Partner Signing Form

Marc S. Plonskier, Manager

Daytime Telephone Number (617)

345-9300

******8,75 *******8.75

CR2E003 (8/98)