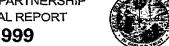
FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED

1999	DIVISION OF CO	ORPORATIONS	98 DFC	31 PM 4: 30		
1. Name of Limited Partnership	1a. DOCUM A98000001	1a. DOCUMENT # A98000001287		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
TOWER INVESTMENT ASSOCIATES, LTD.						
Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.		
155 SOUTH MIAMI AVENUE. 11TH FLOOR MIAMI FL 33130	155 SOUTH MIAMI AVENUE. 11TH MIAMI FL 33130	155 SOUTH MIAMI AVENUE. 11TH FLOOR MIAMI FL 33130		\$2,688,982.00		
2. Mailing Address 155. Miami Avenue	2a. Principal Office Address ISS S. Miami T			5b. Amount of Capital Contributions in FLORIDA to date:		
Suite, Apt. #, etc. Suite //SO City & State	Suite, Apt. #, etc. Suite //SO City & State	Suite, Apt. #, etc. Suite //SO		Applied For Not Applicable		
Zip Country	Zip	Country	7. Certificate of Status Desired 8. Make check payable to: Dept. of	\$8.75 Additional Fee Required State (See reverse side for fee information)		
9 Name and Address of Current	t Registered Agent		10. If changed, new Registere	d Agent/Office		
DI AVDEDO CRAVEGNI & CINCED DA		Name				
25 S.E. 2ND AVENUE, SUITE 730		Suite, Apt. #, etc.	-01720733-101040-1012 			
10a. Pursuant to the provisions of sections 620.1051 am for the purpose of changing its registered office or research. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUST	egistered agent, or both, in the State of F <u>lorio</u> s of section 620,192, Florida Statutes.	da, Such change was au	uthorized by its general partner(s). I hereb	e State of Fiorida, submits this statement y accept the appointment of registered		
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo		City, State & Zip Code	11c. Registration/ Document Number		
PANTHER AIRPORT, INC.	155 SOUTH MIAMI AVEN	U M	IIAMI FL 33130	P98000046475		
Note: General partners MAY NOT	be changed on this form	n; an amendm	ent must be filed to cha	ange a general partner.		

12.	t do hereby 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
	Corporations 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
	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 Partner of the limited partnership, receiver or trustee
	empowered to execute this report as required by chapter 620, Florida Statutes.

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12.30.98

Daytime Telephone Number 305 374-5755 Typed or Printed Name of General Partner Signing Form