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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC 28 AM 8: 20

1. Name of Limited Partnership	1a. DOCUMENT # A9800001792			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
MIRAMAR FLEXSPACE, LTD.					-		
Mailing Address	Principal Office Address	And I		3. Date Formed or Registered	5a. Capital	l Contributions as	
1400 N.W. 107TH AVENUE MIAMI FL 33172-2704	1400 N.W. 107TH AVENUE MIAMI FL 33172-2704			07/28/1998 3a. Date of Last Report	\$7,959,920.40		
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.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For		
City & State	City & State			65-0852387	Not Applicable		
Zip Country	Zip Country			7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to; Dept. of State (See reverse side for fee information)			
g 9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
LEVY, JOEL			Street Address (P.O. Box Number Is Not Acceptable)				
*1400 N.W. 107TH AVENUE MIAMI FL 33172-2704		Suite, Apt. #, etc. 3000027449595					
			<u>-01/15/9901123007</u> *****526 .25 梁紹 \$526.25 <u>-</u>				
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	l Partner x Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
MIRAMAR FLEXSPACE LLC	1400 N.W. 107TH AVENU		MIAMI FL 33172-2704		L98000001246		
Martin Company							
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 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 eath. 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.							
SIGNATURE	Luy	Luj			DATE 12/24/98		
Typed or Printed Name of General Partner Signing Form Joel Levy Executive Vice President Daytime Telephone Number (305) 392-4050							