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

WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE					
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPART Sandra B. Secretary DIVISION OF CO	Mortham of State ORPORATIONS		LED 9 PM 12: 48	
1. Name of Limited Partnership	1a. DOCUMENT#		SECRETARY OF STATE		
•	A98000002251		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
PPOP BUILDING G ASSOCIATES, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
		9/29/98	\$195,000.00		
			3a. Date of Last Report	71757000.00	
				5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	o Ross	4. State or Country of Formation	to date:	
c/o Ross Realty Investmer Suite Apt. # etc.	ts. Inc. Realty Investmen		intFlorida	\$195,000.00	
10021 Pines Blvd. #101	Suite, Apt. #, etc. 10021 Pines Blv	Inc.	6, FE! Number	Applied For Not Applicable	
City & State	City & State		65-0866129 7. Certificate of Status Desired		
Pembroke Pines, FL Zip Country	<u>Pembroke Pines.</u> ^{Zip}	Country		\$8.75 Additional Fee Required	
33024 USA	33024 US	Α	8. Make check payable to, Dept. of Si	ate (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered A	Agent/Office	
Jeffrey P. Orlan		Name			
		Street Address (P.O	oddress (P.O. Box Number Is Not Acceptable)		
10021 Pines Blvd. #106 Pembroke Pines, FL 33024 City		Suite, Apt. #, etc.	Suite, Apt. #, etc.		
		City	FL Zip Code		
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)					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Address of Each General Partner Address of Each General Partner					
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bö	(Numbers) 11b	City, State & Zip Code	11c. Document Number	
Ross Family Holdings, In	10021 Pines Bl		abroke Pines, FL 33024	P98000083969	
\ .			4000026; -11/10/9 ****\$26 AL	85024-4 801092021 1.25 ****526.25 NOV - 9 1998	
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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 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.					

CR2E003 (8/98)