

**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		<i>Stamp: 99 JAN 22 PM 4:29</i>	
1. Name of Limited Partnership Rivers Edge II, Ltd.		1a. DOCUMENT # A98000002385			
2. Mailing Address Suite 7809 Cooper Road Cincinnati, OH 45242 Zip		2a. Principal Office Address 3250 Mary Street Suite 306 Miami FL 33135 Suite, A/City & SZip		3. Date Form is Registered 8/1/97 12/19/1998 3a. Date of Last Report 4. State or Country of Formation	
5a. Capital Contribution (Check one) ☒ 99.00 5b. Amount of Capital Contribution in FLSDA to date		6. FEIN Number 65-0867289 ☐ Applied For Not Applicable 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 Registered Agent Sarrow, Jeffrey A. 300 South Pine Island Rd Plantation FL U.S.		10. If changed, New Registered Agent/Office Name Street Address Suite, Apt. # City Gregory K. McGrath 4561 Gulf of Mexico Drive #101 Longboat Key, FL 34228 FL Zip Code	
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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). Thereby 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) *Gregory K. McGrath* DATE *1/11/99*

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) Style Holdings II, Inc	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3250 Mary St. Suite 306 1826 Cooper Rd Cincinnati OH 45242	11b. City, State, & Zip Code Miami FL 33135 Cincinnati OH 45242	11c. Registered Office (Document ID Number) V 38691
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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, on 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)(g), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(g) 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.

SIGNATURE *Gregory K. McGrath* DATE *1/11/99*
 Typed or Printed Name of General Partner Signing Form *Gregory K. McGrath* Daytime Telephone Number *513 984 5001*

CP25003 (9/98)