

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE**

<p>LIMITED PARTNERSHIP ANNUAL REPORT 1997</p>		<p align="center">FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS</p>
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 MAR 21 AM 11:32

1. Name of Limited Partnership	1a. DOCUMENT # B93000000176
ESDEN PARTNERS, A CALIFORNIA LIMITED PARTNERSHIP	



Mailing Address 21515 VANOWEN ST. SUITE 250 CANOGA PARK CA 91303-2715	Principal Office Address 21515 VANOWEN ST. SUITE 250 CANOGA PARK CA 91303-2715	3. Date Formed or Registered 04/15/1993	5a. Capital Contributions as Shown on record. \$0.00
2. Mailing Address 25115 W AVE STANFORD SUITE, Apt. #, etc. 130		3a. Date of Last Report 01/02/1996	
2a. Principal Office Address SAME AS #2		4. State or Country of Formation CA	
City & State VALENCIA CA		6. FEI Number 95-4233713	
Zip 91355 Country U.S.		7. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent RORICK BUILDERS, INC. 110 ALAFAYA WOODS BLVD. OVIEDO FL 32765	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) SUITE, Apt. #, etc. 900002123329-2 City 156.25 FL 156.25
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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). 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 General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
ESR CORPORATION	21515 VANOWEN ST., #2 25115 W. AVE STANFORD, #130	CANOGA PARK CA 91303 VALENCIA CA 91355	F93000001838 <i>al</i> <i>3-24</i>

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.

SIGNATURE _____ DATE **3/15/97**

Typed or Printed Name of General Partner Signing Form **ESR CORPORATION** Daytime Telephone Number **805 295 0299**

CR2E003 (11/96)