FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



1a.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

BRMC, Limited Partnership

DOCUMENT#

B93000000417

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 26 PM 12: 54

12/23/97

				COUT	E o -	10	
Malling Address	Ted March 380 Lexington Avenue			3. Date Formed of Registered	5a. Capital Controlitions as Shown on record \$1,000.00		
c/ô Ted March BRRC)	9/24/93			
501 E Camino Real				38. Date of Last Report			
Boca Raton, FL 33432				1/97	5b. Amou	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Addre	088		4. State or Country of Formation	to dat	0:	
		N. J. N. S.		DE			
Suite, Apt. #, otc.	Suite, Apt. #, etc. City & State			6. FEI Number		Applied For	
City & State				13-3711311	Not Applicable		
				7. Certificate of Status Desired			
Zip Country	Ζιρ	Zip Country		8. Make check payable to: Dept. of State (See reverse size for fee infor		Fee Required erse sine for fee information	
							
9. Name and Address of Current Registered Agent Prentice Hall Corporation System Inc 1201 Hays Street Suite 105 Tallahassee FL 32301		10. If changed, new Registered Agent/Office					
		Natue					
		Street Address (F.O. Box Number 1300000123945535					
		Suite, Apt. # etc01/08/98-					
		****156.25 ****156.25 Cry 7rp Code					
SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH		AL LIMITED E		DATE			
					-11 0000	IESS ENTITY	
<u> </u>	UST BE REGISTERED	AND ACTIVE			11c.	Registration/	
<u> </u>	UST BE REGISTERED	General Partner (flice Box Numbers)	E WIT 11b.	TH THIS OFFICE.	11c.		
11. Name(s) of General Partner(s)	UST BE REGISTERED 11a. Address of Each (Do NOT Use Post O	General Partner (flice Box Numbers)	E WIT 11b.	TH THIS OFFICE. City, State & Zin Code	11c.	Registration/ Document Number	
11. Name(s) of General Partner(s)	UST BE REGISTERED 11a. Address of Each (Do NOT Use Post O	General Partner (flice Box Numbers)	E WIT 11b.	TH THIS OFFICE. City, State & Zin Code	11c.	Registration/ Document Number	
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M 11. Name(s) of General Partner(s) BRMC, Inc	11a. Address of Each 11a. (No NOT Use Post O 380 Lexington	AND ACTIVE General Partner (flice Rox Numbers) Ave	E WIT	TH THIS OFFICE. City, State & Zip Code York, NY 10168	11c.	Registration/ Document Number	
11. Name(s) of General Partner(s)	11a. Address of Each 11a. (No NOT Use Post O 380 Lexington NOT be changed on this	AND ACTIVE General Partner (flice Box Numbers) Ave form; an amen	E WIT 11b. New	TH THIS OFFICE. City, State & Zip Code York, NY 10168	F9000	Registration/ Document Number 0004369	