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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# B96000000238

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 23 PM 12: 55



	B9600000	<u> </u>		(
ROYAL PALM/RBG XXXIV LTD.			(1861) 1016 1015 011	11 (6) 11 (6) 11 (6) 11 (6) 11	
			001/2	<u>'</u>	
Malling Address	Principal Office Address		3. Date Formed or Register	red 5a. Cap	ital Contributions as wn on record
2255 GLADES RD. SUITE 901E	154 WEST HUBBARD STREET	154 WEST HUBBARD STREET		ļ	
BOCA RATON FL 89491-	CHICAGO IL 60610		3a. Date of Last Report		
			11/01/1996	5b. Amo	ount of Capital Iributions in FLORIDA
2, Mailing Address 499 W. Palmetto Park Roa	2a. Principal Office Address		4. State or Country of Forma	ation 10 us	1(6:
Suite, Apt. #, etc.	Suite Apt # etc.		6. FEI Number (55. (0738264	r:x
Suite 200 City & State	Suite 250		-NOT-APPLICABL		Applied For Not Applicable
3xxx Raton Fl-			7. Certificate of Status Desir	red	\$8.75 Additional
Zip Country 33484 USA	Zip	Country	8. Make check payable to: [Dept. of State (See re	
9. Name and Address of Cur	rent Registered Agent		10. If changed, new Re	egistered Agent/Offici	
NODEL ICAAC ECO		Namo			
KODSI, ISAAC ESQ. -2075 S. Univer sity drive-		Street Address (P.O. Rox Numbor Is Not Acceptable)			
		Suite, Apt.,#,			
"DAVIE-FL-33328			• • • • • • • • • • • • • • • • • • • •		
	e or registered agent, or both, in the State of F	SulTC Sily Ft. LC med limited partners			
10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office egent. I am familiar with, and accept the obliga SIGNATURE (Registered Agent Accepting Appointment)	e or registered agent, or both, in the State of F tions of section 620 192, Florida Statutes.	SWTC Gity LC med limited partners forida. Such change	ship organized or registered under the la e was authorized by its general partner(s	aws of the State of Flo s). I hereby accept the	rida, submits this statemo e appointment of register
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