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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



DOLPHIN MALL ASSOCIATES LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # B9700000194

FHIELD

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S GREAT TO LOTTE DELLARATE LA LORIDA



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Mailing Address 1999 AVENUE OF THE STARS, SUITE 1200 LOS ANGELES CA 90067.		Principal Office Address -1000 AVENUE OF THE STARS - SUITE 1200 -LOS ANGELES CA 50067-		3, Date Formed or Registered 04/23/1997 3a, Date of Last Report 12/12/1997	5a. Capital Contributions as Shown on record \$15,318,283.24 5b. Amount of Capital Contributions in FLORICIA
2. Mailing Address 200 S. Park Road Suite, Apt #, etc. #200 City & State		2a. Principal Office Address 200 S. Park Road Suite, Apt #, etc #200 City & State		OE 6. FET Number 52-2033087	\$18,005,879.25 Applied For Not Appliedble
Hollywood, Z ₁ p 33021	FL Country U.S.A.	Hollywood, Zip 33021	FI. Country U.S.A.	7. Certificate of Status Desired 8. Make Classk physical to Dept. of	XX \$8.75 Addition For Require? State (Sec reverse side for the inform
	9. Name and Address of Curr	ent Registered Agent		10. If changed, new Registere	d Agent/Office

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

Applied For Not Applicable \$8.75 Additional For Require?

10a. Pursuant to the provisions of sections 620-1051 and 620-192. Florida Statutes, the above named limited partnership organized or registered under the tasks 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 partners). Thereby accept the appointment of registered. agent. I am familiar with, and accept the obligations of section 620-192, Florida Statutes 100002742511<u>1</u> -01/14/99--01108--011 ****285.00 *****535.00

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.

Name(s) of General Partner(s)

11a. (De NOT Use Post Office Rox Numbers)

11b.

Otty: State & Zip: Code

11c.

Registration/ Document Number

DOLPHIN MALL GENPAR, INC.

Typed or Printed Name of General Partner Signing Forms

1999 AVENUE OF THE ST

LOS ANGELES CA 90067

F97000002150

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 (7(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 sinus logal effects as if made under outh. I further certify that I am a General Partner of the haited partnership recover or trustee empowered to execute this report as required by chart \$1.70. Florida Statutes.

By: Dolphin Mall Genpar, 1110.

SIGNATURE.

Michael Swerdlow, Exec. Vice Presentant Selephone Number

December 15, 1998 (954) 981-1000

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