

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
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 14 PM 4:19

1. Name of Limited Partnership	1a. DOCUMENT # A18059
SOUTH FLORIDA REALTY ASSOCIATES, LTD.	



Mailing Address 4752 N.W. 167TH STREET HIALEAH FL 33014	Principal Office Address 4752 N.W. 167TH STREET HIALEAH FL 33014	3. Date Formed or Registered 10/15/1984	5a. Capital Contributions as Shown on record. \$1,809,000.00
		3a. Date of Last Report 09/29/1997	5b. Amount of Capital Contributions in FLORIDA to date:
		4. State or Country of Formation FL	
2. Mailing Address <i>40 W. 57th St.</i>		2a. Principal Office Address <i>2515 Shader Rd. St-5</i>	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 13-3245807	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City <i>New York NY</i>	City & State <i>Orlando FL</i>	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip <i>10019</i>	Zip <i>32804</i>	8. Make check payable to: Dept. of State (See reverse side for fee information)	
Country <i>USA</i>	Country <i>USA</i>		

9. Name and Address of Current Registered Agent BASIL, NICHOLAS 4752 N.W. 167TH STREET MIAMI FL 33014	10. If changed, new Registered Agent/Office Name <i>Debbie Abidin, Kellogg Properties, Inc.</i> Street Address (P.O. Box Number is Not Acceptable) <i>2515 Shader Rd.</i> Suite, Apt. #, etc. <i>5</i> City <i>Orlando</i> FL Zip Code <i>32804</i>
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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) *[Signature]* DATE *9-14-98*

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
KELLOGG PARTNERS 84	40 WEST 57TH STREET	NEW YORK NY	G93195000052
H.R.M. REALTY, INC.	40 WEST 57TH STREET	NEW YORK NY	G22397

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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 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 *[Signature]* DATE *11-30-98*
Typed or Printed Name of General Partner Signing Form *David S. Kleger* Daytime Telephone Number *212 586 4756*

CR2E003 (8/98)