INTRASTATE 4 NY # ______________________

STATUS REPORT OF INTRASTATE FINANCING

___________________________________________________
(Name of Issuer)

__________________________________________________
(Street Address) (City and State) (Zip)

TO: ATTORNEY GENERAL OF THE STATE OF NEW YORK
REAL ESTATE FINANCE BUREAU
28 LIBERTY STREET
NEW YORK, NY 10005

1. Period covered by this report:

2. Date that offering commenced:

3. Date of last prior report:

4. Date offering completed (if completed):

5. Has the offering been discontinued: Yes No
   If Yes, please indicate when

6. If offering has not commenced, state reasons briefly:

7. a) Total number and dollar amount of shares or other units offered:
   b) Number and dollar amount sold during the period covered by this report:
   c) Number and dollar amount sold during the period covered by prior reports:
   d) Number and dollar amount of shares or other units still being offered:
   e) Total amount received from public from commencement of offering to date:

8. Name and addresses of all banks where the issuer maintains accounts:

9. Name and address of each bank where funds from offering have been deposited, title of account
   and opening balance preceding this period:(a) _______________________ $______________
   (b) _______________________ $______________

Balance in said accounts as of end of reporting period:
$_______________(a) $_______________(b)

10. Proceeds not heretofore accounted for were spent as follows:

11. Have any of the securities of the issuer been "warehoused" or otherwise sold to persons who were acquiring same with a view towards resale? [ ] Yes [ ] No If Yes, please provide details on separate sheet.

12. Have there been any changes in the management of the issuer? [ ] Yes [ ] No If Yes, please provide details on separate sheet.

13. Have adequate books and records been set up? [ ] Yes [ ] No [ ] Not Yet

Date such books were set up:

Name and address of independent public accountant:

If not set up, explain reasons:

14. Was this offering made on a Short Form Prospectus (INTRASTATE 5) [ ] Yes [ ] No If Yes, attach a copy or a photocopy of the subscription sheet of form INTRASTATE 5 as executed by each subscriber during the period covered by this report. (Issuer)

By:___________________________________________________

Signature:_____________________________________________

Printed Name and Title:__________________________________

Telephone Number:_____________________________________