## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A23513** 

DIVISION OF CORDERATIONS

96 DEC -2 AH 10: 06



COMMODORE HENTALS, LTD.			r ranten i tre made entet alten ritene eine alte einen alten alten aten aten aten aten aten aten aten a	
Mailing Address Principal Office Address  100 N. BISCAYNE BLVD., #3000 3120 KIRK ST,			3. Date Formed or Registered	58. Capital Contributions as Shown on record. \$467,415.00
MIAMI FL 33132	MIAMI FL 33133		3a. Date of Last Report 10/05/1995	
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		
Suite, Apt #, etc.	Suite, Apt. #, etc.	Suile, Apt. #, etc.		Applied For
City & State	City & State		59-2740508	Not Applicable
Zip Country	Zip	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	210	Country	8. Make check payable to: Dept. o	of State (See reverse side for fee information)
9. Name and Address of C	urrent Registered Agent	1	10. If changed, new Registere	ad Agent/Office
HEYDASCH, AXEL 100 NO. BISCAYNE BLVD., 30TH FLOOR MIAMI FL 33132		Name		
		Street Address (P.O. Box Number is Not Acceptable)		
		Suite, Apt. #, etc.		
		City Zip Code		
agent. I am familiar with, and accept the obli-	fice or registered agent, or both, in the State of gations of section 620.192, Florida Statules.	f Florida. Such chang	je was authorized by its general partner(s). I hei	reby accept the appointment of registered
A GENERAL PARTNER TH	IAT IS A CORPORATION UST BE REGISTERED A	I, LIMITED I ND ACTIV	PARTNERSHIP OR OTHE E WITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office		11b. City, State & Zip Code	11c. Registration/ Document Number
commodore international Realty Inc.	3120 KIRK ST.		MIAMI FL 33133	M40525
ļ				0226427 5/9601090022 78.25 ****576.25
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Note: General partners MAY	NOT be changed on this fo	orm; an ame	ndment must be filed to ch	ange a general partner.

CHZE003 (6/96)

1. 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 hability 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 its invade under oath. I further certify that I am a General Partner of the limited partnership, receiver or trusteed empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE A

Typed or Printed Name of General Partner Signing Form