

FILE ON OR BEFORE APRIL 8, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT

1998/1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JAN -4 AM 9:03

1. Name of Limited Partnership

1a. DOCUMENT #

A 32754

VITTORIO HOLDINGS, LTD

Mailing Address

285 NW 199 STREET
#204
MIAMI, FL 33169

Principal Office Address

3. Date Formed or Registered

3/27/1992

5a. Capital Contributions as
Shown on record.

\$503,468.54

3a. Date of Last Report

8/21/98

5b. Amount of Capital
Contributions in FLORIDA
to date:

4. State or Country of Formation

FLORIDA

2. Mailing Address

2a. Principal Office Address

12991 NW FIRST STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

#212
City & State

PEMBROKE PINES FL

Zip

Country

Zip

Country

33028

6. FEI Number

65-0321076

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

KRAMER, ROBERT M.
KRAMER & ZUCKERMAN, PA
4000 HOLLYWOOD BLVD. #485 SO
HOLLYWOOD, FL 33021

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL Zip Code

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)

DATE

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

MARIA BECERRA

12991 NW 1ST STREET
PEMBROKE PINES, FL
2680 RIVIERA COURT
WESTON, FL 33332
#212
33028

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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

Maria E. Becerra, General Partner

DATE

12/29/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/97)