

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 23 AM 10:09

1. Name of Limited Partnership

1a. DOCUMENT #
A94000000816

SFA JADE GARDENS, LTD.



Mailing Address

Principal Office Address

8200 SOUTH DADELAND BLVD., SUITE 609
MIAMI FL 33156

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MIAMI FL 33156

3. Date Formed or Registered

06/17/1994

5a. Capital Contributions as Shown on record

\$7,500.00

3a. Date of Last Report

10/28/1996

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

4. State or Country of Formation

FL

2. Mailing Address

2a. Principal Office Address

9095 SW 87 Ave

9095 SW 87 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 777

Suite 777

City & State

City & State

Miami FL

Miami FL

Zip Country

Zip Country

33176 USA

33176 USA

6. FEI Number

65-0500726

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

KEY CORPORATE SERVICES, INC.
FIRST UNION FINANCIAL CENTER
200 SOUTH BISCAYNE BLVD., 20TH FLOOR
MIAMI FL 33131

10. If changed, new Registered Agent/Office

Name

James R. Mitchell

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

9095 SW 87 Avenue

Suite, Apt. #, etc.

Suite 777

City

Miami

Zip Code

FL 33176

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 12/19/97

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

SFA JADE GARDENS, INC.

9200 SOUTH DADELAND B

MIAMI FL 33156

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***156.25 ***156.25

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

James R. Mitchell

DATE 12/17/97

Typed or Printed Name of General Partner Signing Form

James R. Mitchell

Daytime Telephone Number 305-271-5051

CR2E003 (6/97)