## FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9800000394** 

## MILAN-DAVIS PROPERTIES, LTD.

execute this report as required by chapter 620, Florida Statu

**SIGNATURE** 

FILED 99 MAY 24 PH 4: 37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Mailing Address Principal Office Address			3	Date Formed or Registered	5a. Capital Contributions as Shown on record	
17 DAVIS BOULEVARD	17 DAVIS BOULEVARD TAMPA FL 33606			02/11/1998	\$99,000.00	≘
TAMPA FL 33606			3	3. Date of Last Report		
			<u></u>		5b. Amount of Capital Contributions in FLORIDA	4
2. Mailing Address /// EAST 6/37 57.	2a. Principal Office Address Suite, Apt. #, etc.			State or Country of Formation	#-367,773.00	2
Suite, Apt. #, etc.			E	6. FEI Number Applied For		
City & State	City & State  Zip Country		· · ·	59-3492	930 Not Applicable	_
NEW YORK N.Y.				7. Certificate of Status Desired \$8.75 Additional Fee Required  8. Make check payable to Dept of State (See reverse side for fee information)		
10021	<u> </u>					
9. Name and Address of Current	Registered Agent			10. If changed, new Registered	Agent/Office	-
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		Name G G				_
		Street Add	tress (P.O. Box	5/211	٦.	
PLANTATION FL 33324		Suite, Apt #, etc			7014	
	City			FI Zip Code		4
agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)				DATE		1
A GENERAL PARTNER THAT	IS A CORPORATION, T BE REGISTERED A	, LIMITEI ND ACTI	D PART! IVE WITI	NERSHIP OR OTHI H THIS OFFICE.	ER BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Gener	- Dad-a	11b.	City, State & Zip Code	11c. Registration/ Document Number	] 
SEVENTEEN DAVIS REALTY CORPO	111 EAST 61ST STREET		NE	W YORK NY 10021	P98000012346	
				1 000021 -85/25 ****\$7	E18161071 - 5 /90 - 01074 - 010 ?6.25 ****\$26,25	2080
Note: General partners MAY NOT  12. I do hereby certify that the information supplied with the						ns
from any liability of non-compliance with Section 119.0 is true and accurate and that my signature shall have	17(3)(k) in the event that the information su	applied is deenve	ed exempt from a	public access. I further certify that the	e information indicated on this annual repo	hc

Daytime Telephone Number