FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999

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

99 JAN 25 PM 2:00

1. Name of Limited Partnership

Roca Associates, Ltd.

1a. DOCUMENT # A98000002505

Mailing Address / Principal Office Address

1413 Sunset Harbor Drive, Unit 111
Miami Beach, FL 33139

2. Mailing Address
Same
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Same
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Business Last Registered
11/5/98

3a. Date of This Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions Made or Agreed

$50,000,000

5b. Amount of Capital Contributions in FLORIDA Dollars

6. FEI Number
65-088 1003
☐ 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 additional fees)

9. Name and Address of Current Registered Agent

Atrium Registered Agents, Inc.
1500 San Remo Avenue, #125
Coral Gables, FL 33146

10. Principal Place of Business / Agent's Office

Name
Street Address (P.O. Box Number)
Suite, Apt. #, etc.
City
FL
Zip Code

-02/03/99--01068--011
****526.25 ****526.25

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership organized and/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 the 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 or Document Number
Carlos de la Torre	1413 Sunset Harbour Drive, Unit 111	Miami Beach, FL 33139	
Rosa de la Torre	1413 Sunset Harbour Drive, Unit 111	Miami Beach, FL 33139	

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 understand 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. Further, I 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 presented or that I am empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Carlos de la Torre DATE

Typed or Printed Name of General Partner Signing Form Daytime Telephone Number

CR2E003 (8/98)