

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

FILED

99 MAR 19 PM 12: 58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #  
A98000002314

CENTURY/FISHERMAN'S COVE, LTD.

Mailing Address

901 S.W. 69TH AVENUE  
MIAMI FL 33144

Principal Office Address

901 S.W. 69TH AVENUE  
MIAMI FL 33144

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Formed or Registered

10/06/1998

3a. Date of Last Report

4. State or Country of Formation

FL

6. FEI Number

65-0871197

5a. Capital Contributions as  
Shown on record

\$300,000.00

5b. Amount of Capital  
Contributions in FLORIDA  
to date

☐ 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

MIAMI CORPORATE SYSTEMS, INC.  
5200 BLUE LAGOON DRIVE, SUITE 700  
MIAMI FL 33126

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

10. If changed, new Registered Agent/Office

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

CENTURY MANAGEMENT GROUP, IN  
LABIADA & PRIETO LAND CORP.

901 S.W. 69TH AVENUE  
130 WEST 53RD STREET

MIAMI FL 33144  
HIALEAH FL 33012

P97000011266  
P98000045948

2000002823762--4  
-03/30/99--01060--018  
\*\*\*\*526.25 \*\*\*\*526.25

SL  
3-25-99

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

DATE

3-17-99

Typed or Printed Name of General Partner Signing Form

JOSE LABIADA

Daytime Telephone Number

305-223-3903

CR2E003 (12/98)