

2016 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

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Entity Name: MERCATOR ASSET MANAGEMENT, L.P., LTD.**Current Principal Place of Business:**5200 TOWN CENTER CIR., SUITE 550
BOCA RATON, FL 33486**Current Mailing Address:**5200 TOWN CENTER CIR., SUITE 550
BOCA RATON, FL 33486**FEI Number:** 65-0617051**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TREBBI, BARBARA J
5200 TOWN CENTER CIRCLE, STE. 550
BOCA RATON, FL 33486 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**General Partner Detail :**

Document # P00000117173
Name JXC CORP.
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

Document #
Name BXT CORP
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

Document #
Name GQC CORP
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

Document #
Name CXR CORP
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

Document #
Name RZK CORP
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

Document #
Name CXN CORP
Address 5200 TOWN CENTER CIR., SUITE 550
City-State-Zip: BOCA RATON FL 33486

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA J. TREBBI**GENERAL PARTNER****03/03/2016**_____
Electronic Signature of Signing General Partner Detail_____
Date