LIMITED PARTNERSHIP ANNUAL REPORT <b>1997</b>	FLORIDA DEPARTMENT OF STATE Sangra Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 97 FEB - 5 PH 12: 13	
Name of Limited Partnership	1a. DOCUMENT # A02865			
LORIDA INTERNATIONAL F	PARTNERS #1, LTD.		L LUBIURI SONA DURIO NUON 184	NE BRINEL BIAL NAVRA MANNA UNDAA UNDAL BABRIA UNBAL (BBUR
Aaling Address 2801 PONCE DE LEON BLVD.	Principal Office Address 2801 PONCE DE LEON BLVD. 9TH FLOOR. ATTN: HUNT CORAL GABLES FL 33134		3. Date Formed or Registered 02/21/1974	5a. Capital Contributions as Shown on record \$396,675-28
STH FLOOR, ATTN: HUNT CORAL GABLES FL 33134			3a. Date of Last Report 02/05/1996	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	10 date: #396,675.28
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-1740305	Applied For
City & State	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required
· · · · · · · · · · · · · · · · · · ·			8, Make check payable to: Dep	t. of State (See reverse side for fee information
9. Name and Address of Cu	urrent Registered Agent	Name	10. If changed, new Regist	ered Agent/Olfice
HUNT, RICHARD H. JR. ESQ. 600 BITTMORE WAY			). Box Number Is Not Acceptable)	
SUITE 418 CORAL GABLESS FL 33134		Suite, Apt. #, etc		
		City Zip Code		
		1 Ony		
<ul> <li>10a. Pursuant to the provisions of sections 620.100 for the purpose of changing its registered offic agent. I am familiar with, and accept the oblig</li> <li>SIGNATURE (Registered Agent Accepting Appointmer</li> </ul>	ice or registered agent, or both, in the State of Flo gations of section 620 192, Florida Statutes.	ed limited partnership o	authorized by its general partner(s)	of the State of Florida, submits this statement
for the purpose of changing its registered offin agent 1 am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmer A GENERAL PARTNER THA	Ice or registered agent, or both, in the State of Flo gations of section 60 192, Florida Statutes. Intl	ad limited partnership or rida. Such change was LIMITED PAF D ACTIVE W	authorized by its general partner(s)	FL of the State of Fiorida, submits this statement hereby accept the apprintment of registered
for the purpose of changing its registered offin agent 1 am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmer A GENERAL PARTNER TH	ice or registered event, or both, in the State of Flo gations of section 600 192, Florida Statutes. nt)	ad imiled partnership or rida. Such change was LIMITED PAF D ACTIVE W OX Numbers	DA	FL of the State of Florida, submits this statement hereby accept the apprintment of registered TE <b>TE</b> <b>TER BUSINESS ENTITY</b>
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