

2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000002097

FILED
Apr 25, 2011
Secretary of State

Entity Name: CABI SMA TOWER I, LLLP

Current Principal Place of Business:

19950 W COUNTRY CLUB DRIVE, SUITE 900
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

19950 W COUNTRY CLUB DRIVE, SUITE 900
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-4912440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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 INFORMATION:

Document #: L05000110416
Name: CABI GP SMA, LLC
Address: 19950 W. COUNTRY CLUB DRIVE, SUITE 900
City-St-Zip: AVENTURA, FL 33180 US

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information indicated on this 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.

SIGNATURE: ELIAS AMKIE LEVY

M

04/25/2011

Electronic Signature of Signing General Partner

Date