

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JAN 22 AM 10:12

1/27

1. Name of Limited Partnership
1a. DOCUMENT #
A06751

SWEETWATER, LTD.



Mailing Address
2665 S. BAYSHORE DR.
SUITE M-103
COCONUT GROVE FL 33133

Principal Office Address
2665 S. BAYSHORE DR.
SUITE M-103
COCONUT GROVE FL 33133

2. Mailing Address
3225 AVIATION AVE
Suite, Apt. #, etc.
7th Fl.
City & State
COCONUT GROVE FL
Zip
33133
Country
USA

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

same as mailing address

3. Date Form was registered
08/24/1978

3a. Date of Last Report
05/01/1997

4. State or Country of Formation
FL

5a. Capital Contributions as Shown on record.
\$400,000.00

5b. Amount of Capital Contributions in FL ORIDA to date.

6. FEI Number
59-1900727
☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired
0000024161
\$8.75 Additional Fee Required

8. Make check payable to (Print or Print and Stamp for fee information)
01/28/98 01/04/001
****541.25 ****541.25

9. Name and Address of Current Registered Agent
GARS, IRWIN S
2665 S. BAYSHORE DR.
SUITE M-103
COCONUT GROVE FL 33133

10. If changed, new Registered Agent/Office
Name
GARS, IRWIN S
Street Address (P.O. Box Number Is Not Acceptable)
3225 AVIATION AVE
Suite, Apt. #, etc.
7th Floor
City
COCONUT GROVE FL
Zip Code
33133

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) *M. Gar* DATE 1-13-97

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
SWEETWATER, INC.	2665 S. BAYSHORE DR. 3225 AVIATION AVE. 7th Floor	COCONUT GROVE FL	580580

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 *[Signature]* DATE 12-16-97

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

CR2E003 (6/97)