

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

97 DEC -1 AM 11:21

1. Name of Limited Partnership

1a. DOCUMENT #  
A12047

DUMBFOUNDLING BAY, LTD.



Mailing Address

% DAVID L. ROZEN  
2070 NE 194TH TERRACE  
N MIAMI BEACH FL 33179

Principal Office Address

% DAVID L. ROZEN  
2070 NE 194TH TERRACE  
N MIAMI BEACH FL 33179

3. Date Formed or Registered

02/03/1982

3a. Date of Last Report

12/09/1996

5a. Capital Contributions as  
Shown on record

\$1,363,500.00

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

4. State or Country of Formation

FL

6. FEI Number

59-2173286

☐ 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)

2. Mailing Address

3640 Yacht Club Dr.,  
Suite, Apt. #, etc.  
#1406

City & State  
Aventura, FL  
Zip Country  
33180

2a. Principal Office Address

2875 NE 191 St.  
Suite, Apt. #, etc.  
#702A

City & State  
Aventura, FL  
Zip Country  
33180

9. Name and Address of Current Registered Agent

ROZEN, DAVID L.  
2070 N.E. 194 TERRACE  
N MIAMI BEACH FL 33179

10. If changed, new Registered Agent/Office

Name

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

3640 Yacht Club Dr  
Suite, Apt. #, etc.  
#1406

City

Aventura

FL

Zip Code  
33180

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)

OLYMPIAN INVESTMENTS, INC  
MILOMA, INC.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

2070 N.E. 194 TERR.  
2875 N.E. 191 ST. #70

11b. City, State & Zip Code

MIAMI FL  
MIAMI FL

11c. Registration/  
Document Number

698648  
676408

700002364867-1  
-12/05/97-01112-008  
\*\*\*\*541.25 \*\*\*\*541.25

dec

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 11-26-97

Typed or Printed Name of General Partner Signing Form: DAVID L. ROZEN, Pres.

Daytime Telephone Number 305-938-9300

CR2E003 (6/97)