FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

SIGNATURE Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 SEP 18 AMID: 48

9/14/98

Daytime Telephone Number

Name of Limited Partnership	A12250			
CORAL WAY PROPERTIES	I, LTD.			
Malling Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.
68D1 N.W. 74TH AVENUE	6801 N.W. 74TH AVENUE	6801 N.W. 74TH AVENUE MIAMI FL 33166		\$3,501,000.00
MIAMI FL 33166				
			12/31/1997	5b. Amount of Cepital Contributions in FLORIDA
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address		to dele:
Et thomag results	· · · · · · · · · · · · · · · · · · ·			
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For
City & State	City & State	City & State		☐ Not Applicable
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Regulred
			8. Make check payable to: Dept. of State (See reverse side for fee information)	
A Name and Address of C	Current Registered Agent		10. If changed, new Registerer	d Agent/Office
Name		Name		4 .
PERNAS, ALFREDO A Street Addi			(P.O. Box Number Is Not Acceptable)	- mil
6801 N.W. 74TH AVENUE MIAMI FL 33166 Suite, Apt. #		Suite, Apt. #, s	otc.	
// A		City Z _i ρ Code		
		<u>/</u>		FL
10a. Pursuant to the provisions of sections 620.1 for the purpose of changing its registered of agent. I am familiar with, and accept the obline.	rice or registered agent, or both, in the State of Flori	d limited partnerst de. Such change v	nip organized or registered under the laws of the was authorized by its general partner(s). I hereb	a State of Florida, submits this statement y accept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointme			DATE	9/14/98
A GENERAL PARTNER TH	IAT IS A CORPORATION, L IUST BE REGISTERED AN	IMITED F	PARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	l Partner x Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
INVERIONES MAPAMA, N.V.	6801 N.W. 74TH AVENUE		MIAMI FL 33166	F9400006469
			7000026458375 -09/22/9801040015 ****\$26,25 ****\$26,25	
Note: General partners MAY	-//- //			
 I do hereby certify that the information supplied Corporations from any liability of non-complian this annual report is true and accurate and that empowered to execute this report as required. 	ce with Section 119.07(3)(k) In the event that the int my signature shall have the same legal effects as i	quality for the exe ormation supplied I made under oath	emption stated in Section 119.07(3)(k), Florida S is deemed exempt from public access. I further in I further certify that I am a General Partner of	natures. I release the Division of certify that the information indicated on the limited partnership, receiver or trustee