


**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-14

LIMITED PARTNERSHIP ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra Mortham</b> Secretary of State DIVISION OF CORPORATIONS
<b>1. Name of Limited Partnership</b>  <b>BROWNSVILLE LIMITED</b>		<b>1a. DOCUMENT #</b> <b>A15730</b>



<b>Mailing Address</b> 9485 S.W. 72 STREET SUITE A-295 MIAMI FL 33173	<b>Principal Office Address</b> 9485 S.W. 72 STREET SUITE A-295 MIAMI FL 33173	<b>3. Date Formed or Registered</b> 11/17/1983	<b>5a. Capital Contributions as Shown on record.</b> <b>\$250,000.00</b>
<b>2. Mailing Address</b> 7130 SW 43 St Suite, Apt. #, etc. MIAMI FL		<b>3a. Date of Last Report</b> 01/11/1996	
<b>2a. Principal Office Address</b> 7130 SW 43 St Suite, Apt. #, etc. MIAMI FL		<b>4. State or Country of Formation</b> FL	
<b>6. FEI Number</b> 59-2376616		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
<b>7. Certificate of Status Desired</b>		<input type="checkbox"/> \$8.75 Additional Fee Required	
<b>8. Make check payable to Dept. of State (See reverse side for fee information)</b>			

<b>9. Name and Address of Current Registered Agent</b> MARTINEZ, HUMBERTO 9485 S.W. 72 STREET SUITE A-295 MIAMI FL 33173	<b>10. If changed, new Registered Agent/Office</b> Name Street Address (P.O. Box Number is Not Acceptable) 7130 SW 43 St Suite, Apt. #, etc. MIAMI City MIAMI FL Zip Code 33155
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**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.**

<b>11. Name(s) of General Partner(s)</b> 48 STREET CORPORATION	<b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b> 9485 S.W. 72 ST, #A-2	<b>11b. City, State &amp; Zip Code</b> MIAMI FL	<b>11c. Registration/Document Number</b> 621106
400002059984--7 -01/16/97--01024--015 ***576.25 ***576.25			

**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 *Humberto Martinez* DATE 12/12/96  
 Typed or Printed Name of General Partner Signing Form **HUMBERTO MARTINEZ** Daytime Telephone Number (305) 669-9244

CR2E003 (6/96)