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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A22058** FILED SECRETARY OF STATE DIVISION OF ECPPORATIONS

96 DEC 27 AM 9: 40





RO DEVELOPMENT, LTO	D .		1 1005001 1010 12010 11011 00102 01		
Mailing Address 14652 BISCAYNE BLVD.	Principal Office Address 14652 BISCAYNE BLVD.	•		5a. Capital Contributions as Shown on record.	
NORTH MIAMI FL 33181	NORTH MIAMI FL 33181			5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	Contributions in FLORIDA to date:	
	,		FL		
Suite Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
?ip Country	Z ip	Country	Make check payable to: Dept_of State (See reverse side for fee information)		
		1			
9, Name and Address of Current Registered Agent		10. // changed, new Registered Agent/Office			
GRO DEVELOPMENT CORP. 14652 BISCAYNE BLVD. N. MIAMI FL 33181					
		Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apt #, etc.			
		City		FL Zip Code	
for the purpose of changing its registered agent. Fam familiar with, and accept the cooling National Section 1997. A GENERAL PARTNER 1	0.1051 and 620.192, Florida Statutes, the above name of office or registered agent, or both in the State of Floricobligations of section 620.192, Florida Statutes trient). THAT IS A CORPORATION, L MUST BE REGISTERED AN	ida. Such change v	was authorized by its general partner(s). I here DATE ARTNERSHIP OR OTHE	aby accept the appointment of registered	
1. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bo	l Partner ox Numbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number	
GRO DEVELOPMENT CORP	14652 BISCAYNE BLVD.		NORTH MIAMI FL	M19807	
			7000021 -01/07 ****\$	ロ 47777 ア /9701066002 58.75 ****558.75	
Note: General partners MA	Y NOT be changed on this form	n; an amen	dment must be filed to cha	 ange a general partner.	
10 Date because and the late a late of the con-	the decidence of the decidence of the control of th	d a cold day short or	makes aloted in Castina 440 07/03/13 Ct - 14-	Care and I address the Division of	

OR2F003 (6

I do hereby cert'y 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 amitual report is true and accurate and accurate and accurate and section 119.07(3)(k) in the event that and under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute the report as required by whigher 62). Exhibits attained statutes

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Coostal

DATE 12/23/46

Daytime Telephone Number 305 940 3377