1. Name and Address of Convert Registered Agent 10. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent 0. 9. None and Address of Convert Registered Agent Convert Register	LIMITED PARTNERSHIP ANNUAL REPORT 1999			FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 21 PM 2:05	
Valing Address Principal Office Address 3. Date Formed or Registered Od./18/86_3 54. Capital Contributions at Suite 200 Mismi, FIL 33156 T740 SW 104th Street Suite 200 Sale to care of care Poorted Suite 200 100.00 2. Mailing Address 2a. Principal Office Address 100.00 2. Mailing Address 2a. Principal Office Address 100.00 3. Base Country of Formition FIL 59-2685951 100.00 2. Mailing Address 2a. Principal Office Address FIL Number Sp-2685951 100.00 2. Mailes Address of Country 2p Country FIL Number Sp-2685951 100.00 3. Base and Address of Country 2p Country R. Maile address of Smarten Registered Agent 10. It charged, new Registered Agent/Office 9. Nees and Address of Country State Address (Country of Smarten Registered Agent/Office Name State Address (Country of Smarten Registered Agent/Office 10. It charged, new Registered Agent 10. It charged, new Registered Agent/Office Name Miaman, F.I. 33156 Name State Address (Country of Smarten Registered Agent/Office Name 10. It charged, new Registered Agent/Office Name State Address (Country of Smarten Registered Agent/Office 10. It charged, new Registered Agent of the control of State Agent (Country of Smarten Registered Agent/Office Name 10. It charged, new Registered Agent	1. Name of Limited Partnership				
7740 SW 104th Street 7740 SW 104th Street 04/18/86 Suite 200 Miami, FL. 33156 100.00 Alling Address 2a. Principal Office Address 11/21/97 Suite Aot #.etc. 6. FE Nomber 100.00 Suite Aot #.etc. 6. FE Nomber 100.00 Suite Aot #.etc. 6. FE Nomber 100.00 City & State Obj & State 79-268591 Applied For Typ Country Zp Country 8. Make check expanse on Dest 98.75 Address 9. Name and Address of Current Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 9. Name and Address of Current Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent 10. It changed.new Registered Agent Address (P.O. Box Number Is Not Xocquare) Witami, F.I. 33156 State of Current Registered Agent Address (P.O. Box Number Is Not Xocquare) 11/2 Refer 11/2 104. Refer a finder gas in page of the specific matche address (P.O. Box Number Is Not Xocquare) 11/2 Refer 11/2 104. Refer a finder gas in th	Americana Asŝociates, Li	td.			
NAO SM 10411 Street 7/40 SW 104th Street Suite 200 Miami, Fl. 33156 Maing Address 2a. Principal Office Address 2. Mailing Address 2a. Principal Office Address 2. Mailing Address 2a. Principal Office Address 3u/6. Apt 4, etc. 5. If Standard Suite. Apt 4, etc. 5. Fill Number Suite. Apt 4, etc. 5. Fill Number City 4 State Dity 6 State 2.p Country Zip Country State Address of Current Registered Agent 10. If changed, new Registered Agent 9. Mane and Address of Current Registered Agent 10. If changed, new Registered AgentColor 9. Mane and Address of Current Registered Agent 10. If changed, new Registered AgentColor 9. Mane and Address of Current Registered Agent 10. If changed, new Registered AgentColor 9. Mane and Address of Corrent Registered Agent 10. If changed, new Registered AgentColor 9. Mane and Address of Corrent Registered Agent 10. If changed, new Registered AgentColor 9. Mane and Address of Color and 60. 102. Regist States, the above-named intel grantered and registered under the state for the agent at th	Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.
2. Mailing Address 2a. Principal Office Address FL 100.00 Suite Apt. #, etc. Suite, Apt. #, etc. A State A Oplied For City & State City & State City & State A Oplied For Zip Country Zip Country File Number A Oplied For Zip Country Zip Country R. Make chick spatials to Days of State (See revenue adds to the Info. 2ip Country Zip Country R. Make chick spatials to Days of State (See revenue adds to the Info. 9. Name and Address of Current Registered Agent Name Name State (See revenue adds to the Info. Dorssy, Claude 7740 SW 10/4th Street State (P.O. Box Number Is Not Acceptable) State (See revenue adds to the spatial of Tobia, and spatial of State (See revenue adds to the spatial of Tobia, and spatial of Tobia, a			treet		100.00
2. Mailing Address 2a. Principal Office Address FL 100.00 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For City & State City & State 7. Centrols of State Desired B.7. Sections of State Desired B.7. Sections of State Desired Zip Country Zip Country R. Male check payable to Dept. of State Sections and State Sections of State Desired B.7. Sections of State Desired B.7. Sections of State Desired Agent/Office 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name State, Apt. #, etc. Introduct Agent Agent/Office 7.40 SW 104 th Street State, Apt. #, etc. Introduct Agent/Office State, Apt. #, etc. Introduct Agent/Office Miamain, F1. 33156 State, Apt. #, etc. Introduct Agent/Office State, Apt. #, etc. Introduct Agent/Office A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITIED A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITIED 11. Named of General Partners 11a. (go NUT Use Post Office Bax Number) 11b. City, State & Zip Coto 11c. Regestrator State Agent of General Partners MAY NOT be changed on this fortig an amendment mustate of tho		Miami, Fl. 3315	6		Contributions in FLORIDA
City & State City & State State<			·	FL	100.00
Zip Country Zip Country Zip Country Zip Country Zip State (See revene side to Test Registered Agent) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent Street Address (PO. Bon Number Is Not Acceptable) 9. Name and Address of Current Registered Agent Street Address (PO. Bon Number Is Not Acceptable) 9. Name and Address of Sci 0.051 and Sci 1.02, Rorda Statute, the above-named inited partnership organized or registered under the laws of the State of Floida, submits in its state of Floida, Submits its state (Country Kingel Agent Accepting Agent Accepting Appendement) 10. In Immuter in Imm			<u> </u>	J +-	Applied For Not Applicable
Dorrsy, Claude 7740 SW 104th Street Suite 200 Miami, Fl. 33156 Street Address (P.O. Box Number Is Not Acceptable) Suite 200 Miami, Fl. 33156 Suite, Apt. #, etc. 	·		ountry	·	Fee Required
Dorsy, Claude 7740 SW 104th Street Suite 200 Miami, Fl. 33156 Street Address (P.O. Box Number is Not Acceptable) Suite 200 Miami, Fl. 33156 Suite Address (P.O. Box Number is Not Acceptable) 10a. Pursuant to the provisions of sections 820.1051 and 820.192, Royda Statutes, the above-named limited partnership organized or registered and/or the lixes of the State of Fordia, submit this state agent I am familiar with, and accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(e) of General Partner(s) 11a. (Co NOT Use Peet Office Statutes, Use NOT Use Peet Office Statutes, Inc. 11b. City, State & 2/p Code 11c. Registration Operation of the State of Fordia, submit the state of State of Code Statutes, Tradies of Each General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(e) of General Partner(s) 11a. (Co NOT Use Peet Office Statutes, Store & 2/p Code 11c. Registration Operation of the State of State & 2/p Code 11c. Registration Operation of Depresent Number Firistt'Florida Equities, Inc. 7740 SW 104th Street Suite 200 Miámii, FL 33156 M16984 12. to hereby centry that the aformation supplied with the ling is volument burget burget and exemption stated in Section 119.07(30)(h). Brode Statutes, Trefease the Dysion of Corporation of non syliability of non-complication with Section 119.07(30)(h). Brode Statutes, Trefease the Dysion of Corporation form any ideability of non-complication with Section 119.07(30) h). Brode statures, Trefease the Dysion of Corporation form any i	9 Name and Address of Current	Registered Agent		10. If changed, new Registere	ed Agent/Office
for the purpose of changing its registered effice 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 520.182, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) DATE Interview With THIS OFFICE. Interview With Sector Partner(s) Interview With Sector Partner(s) FritsttFlorida Equities, TY40 SW 104th Street MidMIT, FL 33156 MIde984	7740 SW 104th Street Suite 200		Suite, Apt. #, etc.	600002 	3/9901070012
Inc. Inc. Inc. Inc. Inc. Inc. Inc. Document Number FirsttFlorida Equities, Inc. 7740 SW 104th Street Suite 200 Miami, FL 33156 M16984 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 event from public access. I further certify that the information indiced	for the purpose of changing its registered office or in agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT I	egistered agent, or both, in the State of Florida of section 620.192, Florida Statutes.	a. Such change was at	thorized by its general partner(s). I her DATE	eby accept the appointment of registere
Inc. Suite 200 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 indiced	11. Name(s) of General Partner(s)	Address of Each General Pa (Do NOT Use Post Office Box N	artner Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number
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 ilability 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 in Section 119.07(3)(k) access.	First:Florida Emuities		eet Mi	MMI, FL 33156	M16984
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 in Section 119.07(3)(k) access.			l l		
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 indicat					
empowered to execute this report as required by chapter 620, Florida Statutes.	Inc.				