

**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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

36 OCT -2 PM 12:26

1. Name of Limited Partnership

1a. DOCUMENT #
A23878

BIJOUX TERNER, L.P., LTD.



Mailing Address

Principal Office Address

~~7200 NW 7 ST.~~
MIAMI FL 33126

~~7200 NW 7 ST.~~
MIAMI FL 33126

3. Date Formed or Registered

12/19/1986

5a. Capital Contributions as
Shown on record

\$3,150,000.00

3a. Date of Last Report

09/28/1995

4. State or Country of Formation

DE

5b. Amount of Capital
Contributions in FLORIDA
to date

2. Mailing Address

777 N.W. 72nd. AVENUE

2a. Principal Office Address

777 N. W. 72nd. AVENUE

Suite, Apt. #, etc.

3-CC-45

Suite, Apt. #, etc.

3-CC-45

City & State

MIAMI, FL.

City & State

MIAMI, FL.

Zip

33126

Country

Zip

33126

Country

6. FET Number

58-1711175

☐ 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)

9. Name and Address of Current Registered Agent

CEDENO, SERGIO

~~7200 NW 7 ST.~~
MIAMI FL 33126

10. If changed, new Registered Agent/Office

Name

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

777 N. W. 72nd. AVENUE

Suite, Apt. #, etc.

3-CC-45

City

MIAMI,

FL

Zip Code

33126

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)

BIJOUX TERNER, INC.

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

~~7200 NW 7 ST.~~

**777 N. W. 72nd. AVENUE
SUITE 3-CC-45**

11b. City, State & Zip Code

MIAMI FL

33126

11c. Registration/
Document Number

456248

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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 or 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 _____

BIJOUX TERNER, INC. GENERAL PARTNER

Typed or Printed Name of General Partner Signing Form

SALOMON TERNER, PRESIDENT

DATE **SEPTEMBER 22, 1996**

Daytime Telephone Number

305-266-9000

CR2E003 (6/96)