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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# ^aA26248

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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PLANTATION INDUSTRIAL PAR	RK, LTD.						İ	
Mailing Address	Principal Office Address		- i	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
% HOPKINS-EASTON & ASSOCIATES, INC.	% HOPKINS-EASTON & ASSOCIATES, INC.			04/11/1988				
300 GRECO AVE.	300 GRECO AVE.			3a. Date of Last Report \$1,000,000.00				
CORAL GABLES FL 33146	ES FL 33146 CORAL GABLES FL 33146			12/29/1997	5b. Amo	5b. Amount of Capital Contributions in FLORIDA		
3				4. State or Country of Formation to date:				
2. Mailing Address	2a. Principal Office Address			FL				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	Applied For			
City & State	City & State			65-0064304	☐ Not Applicable			
Zip Country	Zip Country		—	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			10. If changed, new Registered Agent/Office					
EASTON, EDWARD W.		Name						
% HOPKINS-EASTON & ASSOCIATES, INC.		Street Address	(P.O. Bo	Number Is Not Acceptable)			7	
300 GRECO AVE.		Suite, Apt. #, etc.						
CORAL GABLES FL 33146		City FL Zip Code				Zip Code	٦	
for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUST	of section 620.192, Florida Statutes.	IMITED PA	ART	DATE_				
11. Name(s) of General Partner(s)	11a. Address of Each General		1b.	City, State & Zip Code	11c.	Registration/ Document Number	7	
PLANTATION INDUSTRIAL PA	RK CORP., 300 GRECO A		CORAL GABLES FL		M75921		CR2E003 (8/98)	
FIRST GROVE CORPORATION 2000 S. BAYSHORE DR.			COCONUT GROVE FL		M72970		2E003	
				0000021 -11/04/ ****\$2			CR	
1								
Note: General partners MAY NOT	be changed on this form	ı; an amen	dmen	t must be filed to cha	nge a g	eneral partner.		
12. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with this annual report is true and accused and that my sign empowered to execute this proof as required by chapt	Section 119.07(3)(k) in the event that the info nature shall have the same legal effects as if	ormation supplied Is	s deeme	exempt from public access. I further o	ertify that the	information indicated on		
SIGNATURE Jaurely Las				DATE	10-22-	98		
Typed or Printed Name of General Partner Signing FormEDWARD W. EASTON				Daytime Telephone Number (305) 448–9999				