

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

FILED

99 APR -6 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A31247

NEW BERMOR ASSOCIATES, LTD.

Mailing Address

~~80 S.W. 8TH STREET, SUITE 2590~~
~~MIAMI-FL 33130-3012~~

Principal Office Address

~~80 S.W. 8TH STREET, SUITE 2590~~
~~MIAMI-FL 33130-3012~~

3. Date Formed or Registered

02/28/1991

5a. Capital Contributions as
Shown on record

\$1,445,400.00

3a. Date of Last Report

12/12/1997

5b. Amount of Capital
Contributions in FLORIDA
to date

4. State or Country of Formation

FL

6. FEI Number

65-0262631

☐ 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)

2. Mailing Address

180 SOLANO PRADO

Suite, Apt. #, etc.

CORAL GABLES, FL

City & State

33156

Zip

Country

2a. Principal Office Address

180 SOLANO PRADO

Suite, Apt. #, etc.

CORAL GABLES, FL

City & State

33156

Zip

Country

9. Name and Address of Current Registered Agent

MORTON, RICHARD
MORTON AND MORTON, ATTORNEYS AT LAW
~~80 S.W. 8TH STREET, SUITE 2590~~
MIAMI-FL 33130-3012

10. If changed, new Registered Agent/Office

Name

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

180 SOLANO PRADO

Suite, Apt. #, etc.

City

CORAL GABLES

FL

Zip Code

33156

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)

BAYSHORE GEN. CORP.

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

80 S.W. 8TH STREET, #2

180 SOLANO PRADO

11b. City, State & Zip Code

MIAMI-FL

CORAL GABLES

FL 33156

11c. Registration/
Document Number

S20386

30000288208-0

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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 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

Richard Morton
RICHARD MORTON

DATE

4/1/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number (305) 666-1071