## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT ·1998



LLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes  10a. Pursuant to the provisions of section 620 1051 and 620 192, Florida Statutes  Florida Statutes  Signature (Registered Agent) Agent Accept the obligations of section 620 192, Florida Statutes  Signature (Registered Agent) Agent Accept the obligations of section 620 192, Florida Statutes  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	CADILLARC HOTEL ATD A 3 1994  981 I E BROND VIEW DR. BRY HAR BOR ISLOWDS  L. 33154-1116.  Maining Address  Thirtiped Chace Anthress  28 Arthrophog Citize Address  3. Could formed in Registered  4. State or Country  3. Date formed in Registered  4. State or Country of Country  7. Continue of State Deviced  1. Country  7. Country  7. Country  8. Visite citize in Citize  9. Name and Address of Current Registered Agent  10. If otherwise in the Registered Agent Citize in Registered Agent Citi		DIVISION OF C	Onronations	97000	
9 FL E. BROND VIEW N. BAY HAR BO R ISLANDS FL 33 154 - 1116.  Mailing Address Principal Office Andress Principal Office Andress Principal Office Andress  1. Date Formed or Registered a Schown or record  2. Mailing Address 3. Date Formed or Registered or Registered 4. Sinte or Country FL 5. Annount of Capital Contributions in FLORIDA 5. Sinte FL 5. Annount of Capital Contributions in FLORIDA 5. Sinte FL 5. Sinte FL 6. FL Number 6. FL N	9 St. I. E. BROAD VIEW IX. B MY HAM BOR ISLANDS  Principal Cline Admics  Principal Cline Admics  Principal Cline Admics  13. Date Formed of Regulaters  9 1/8/9/1  36. Date of increasing Regulaters  15. Date Formed of Regulaters in Floritish Sealers  15. In National Country  15. Date Formed of Regulaters in Floritish Sealers  15. In National Country  15. Date Formed of Regulaters in Floritish Sealers  15. In National Country  15. Date Formed of Regulaters in Floritish Sealers  15. In National Country  15. Country  15. In National Country  15. In National Country  15. Country  15. In National Country  16. In National Country  17. Country  18. Make and Address of Country Ingl. In Inches Sealers  16. In National Country  17. Country  18. Make and Address of Country  19. Name and Address of Country Ingl. Inches Sealers  10. In Resignation of Deat of Seas (the revenue Sea for the Format  10. In Resignation of Deat of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the revenue Sea for the Format  10. In Resignation of Seas (the Format Sea format Sea format Sea formation of Property Sea for the Sea of the Formation of Property Sea formation of Prop	1. Name of Limited Partnership	1a. DOCUM	IENT#	7 020-8	AM 9: 10
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As a capital Contributions as Shown on record  2. Mailing Address  3. Date Formed or Registered  4. State or Country of Formation  4. State or Country of Formation  5. Mark or Country  7. Certificate of Status Desired  7. Certificate of Status Desired  8. Marke or Cock payable to Dept. of State (Sco reverse side for fee information of the purpose of Part of the purpose of State (State Part of the purpose of Changing lis registered agent, or both, in the State of Foods Such change was authorized by its general partner(s). I horoby accept the appointment of registered agent I am familiar with, and accept the obligations of section (270 192, Foods Statutes).  3. Date Formation or record  4. State or Country of Formation  5. State Of Country Applications in Fig. Office Address (P.O. Box Number is Not Acceptable)  7. Certificate of Status Desired  7. Certificate of Status Desired  8. Marke or cock payable to Dept. of State (Sco reverse side for fee information of Partners (P.O. Box Number is Not Acceptable)  8. Marke or cock payable to Dept. of State (Sco reverse side for fee information of Partners (P.O. Box Number is Not Acceptable)  8. Street Address (P.O. Box Number is Not Acceptable)  9. Pursuant to the provision of sections (270 192, Foods Statutes, the above named limited partnership organized or registered under the laws of the State of Foods. Such change was authorized by its general partner(s). I horoby accept the appointment of registered agent than familiar with, and accept the obligations of section (270 192, Foods Statutes). The application of sections (270 192, Foods St	Section   Sect	BAY HARBOR ISLAND	14-1116.			
2. Mailing Addross  3. Date of t ast Report  4. State or Country of formation  3. State or Country of formation  3. State or Country  3. Mailing Addross  3. State or Country  4. State or Country of formation  5. State or Country  5. State or Country  6. State or Country  7. Certificate of Status Desired  8. Make check payable to Dept. of State (See reverse side for fee information or Registered Agent)  7. Certificate of Status Desired  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent)  8. Make check payable to Dept. of State (See reverse side for fee information or Registered Agent)  8. Make check payable to Dept. of State (See reverse side for fee information or Registered Agent)  9. Name  10. If changed, new Registered Agent)  Name  Street Address (P.C. Box Number is Not Acceptable)  5. Supplement to the provisions of sections 620 1051 and 620 192, Floride Statutes, the above named limited partnership organized or registered under the laws of the State of Floride, submits this state of for the provision of sections 620 1051 and 620 192, Floride Statutes  10a. Pursuant to the provisions of sections 620 1051 and 620 192, Floride Statutes  5. Supplement of the provisions of sections 620 1051 and 620 192, Floride Statutes  5. Supplement of the provisions of sections 620 1051 and 620 192, Floride Statutes  5. Supplement of the provisions of sections 620 1051 and 620 192, Floride Statutes  5. Supplement of the provisions of sections 620 1051 and 620 192, Floride Statutes  6. Supplement of the state of Control of the State of Floride Such change was surbdived by its general partner(s). I hereby accept the appointment of registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	2. Mailing Address 28 Analysing Cities Address Suita, Apri, 4, citc.  Suita, Apri, 4, citc.  Suita, Apri, 4, citc.  City & Stato  City & Stato  Country  Final DA  Suita Country  Suita Country  Final DA  Suita Country  Final DA  Suita Country  Final Da  Suita Country  Suita Country  Final Da  Suita Country  Suita Co				· · · · · · · · · · · · · · · · · · ·	<b>5a.</b> Capital Contributions as Shown on record
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Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Flore, DA  Zip  Country  B. Make check payable to Dept. of State State for fee inform  9. Name and Address of Current Registered Agent  Name  10. If changed, new Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Typ Code  Country  Street Address (P.O. Box Number is Not Acceptable)  10a, Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited pertnership organized or registered under the laws of the State of Florida, submits this state of for the purpose of changing its registered diffice 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 Acceptable (SIGNATURE (Registered Agent Acceptance))  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	Suite, Apt. #, ctc.  City & State  Committy  The Country  Phole I De Country  The The The The The Country  The Country  The Country  The The The The The The Country  The The The The The The The The Country  The Country  The Country  The				4. State or Country of Formation	Centributions in FLORIDA to date:
Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Flore, DA  Zip  Country  B. Make check payable to Dept. of State State for fee inform  9. Name and Address of Current Registered Agent  Name  10. If changed, new Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Typ Code  Country  Street Address (P.O. Box Number is Not Acceptable)  10a, Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited pertnership organized or registered under the laws of the State of Florida, submits this state of for the purpose of changing its registered diffice 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 Acceptable (SIGNATURE (Registered Agent Acceptance))  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	Suite, Apt. #, ctc.  City & State  Committy  The Country  Phole I De Country  The The The The The Country  The Country  The Country  The The The The The The Country  The The The The The The The The Country  The Country  The Country  The	2. Mailing Addross	2a. Principal Office Address	US BUE	FL.	
Zip Country  7ip Country  8. Make check payable to Dept. of Status Desired  8. Make check payable to Dept. of Status (See reverse side for fee inform  10. If changed, new Registered Agent/Office  Name  Name  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apl. 6, etc.  City  FL  7ip Code  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 staten for the purpose of changing its 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 1 am familiar with, and accept the obligations of section 620 192, Florida Statutes  Signature (Registored Agent Accepting Appointment).  DATE	Second   S		Suite, Apt. #, etc.			Applied For Unot Applied Not Applicable
9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  Name  Street Address (P.O. Box Number Is Not Acceptable)  Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zip Code  10a. Pursuant to the provisions of sections 620 1051 and 620 1092, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this staten for the purpose of changing its 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 (Registored Agent Accepting Appointment)  DATE  DATE  DATE	9, Name and Address of Current Registered Agent  Since I Address (P.O. Box Number is Not Acceptable)  Since Address (P.O. Box Number is Not Acceptable)  10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above named limited pertinership organized or registered under the laws of the State of Fronds, submits this state of fords. Such change was authorized by its general partner(s). Thereby accept the appointment of registered agent, or 501, in the State of Fords. Such change was authorized by its general partner(s). Thereby accept the appointment of registered agent, or 501 105 105 105 105 105 105 105 105 105	City & State	MIAMI BEI	nett.		\$8.75 Additional
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zip Code  7tp Code  To 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 Accepturg Appointment).  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	Sirent Address (P.O. Box Number is Not Acceptable)  Sirent Address (P.O. Box Number is Not Acceptable)  Sirent Address (P.O. Box Number is Not Acceptable)  Suite, Apt. 8, etc.  City FL Zip Code  The Pursant to the provisions of sections 520 1051 and 620 192, Florida Statutes. The above named limited pertnership organized or registered under the laws of the State of Finder, submits this state of to the purpose of changing its registered office or registered agent, or both, in the State of Finder, submits this state of for the purpose of changing its registered agent, or both, in the State of Finder, submits this state of finder, submits this state of the State of Finder, submits this state of the State of Finder, submits this state of Finder, subm	Zip Country	FLORIDA	33141.	8. Make check payable to Dept. of	
190 BAL FOUR DRIVE  BAL HAR BOUR, FLOR IDA  City  City  FL  Zip Code  To 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 G20 192, Florida Statutes  BIGNATURE (Registered Agent Accepting Appointment).  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	10a. Pursuant to the provisions of sections 620 192, Fordida Stelutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this state of the purpose of changing the registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). Thereby accept the appointment of registe agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes.  SIGNATURE (Registored Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (In NOT Use Post Office for Aurithers)  11b. City, State & 7m Code  11c. Registration of Counter Aurity Counter Agent Ag	9. Name and Address of Current Registered Agent			10. If changed, new Registered	d Agent/Office
190 BAL FOUR DRIVE  BAL HAR BOUR, FLOR IDA  City  City  FL  Zip Code  The 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 statem for the purpose of changing its 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  BIGNATURE (Registered Agent Accepting Appointment).  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	Sired Radies (P. Bax Name) is Not Acceptage:    19	50EL B. 505				
BAL HAR BOUR, 33/14. City FL 71p Code  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 staten for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of register agent. I am familiar with, and accept the obligations of section 620-192, Florida Statutes  BIGNATURE (Registered Agent Accepting Appointment).  DATE:  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	BALL HAR BOUR, 33/14. City FL   Zip Code  10a. Pursuant to the provisions of sections 620 1051 and 620 192. Forlide Statutes, the above-named limited pertnership organized or registered under the laws of the State of Floride, submits this statem for the purpose of changing lite registered agont, or both, in the State of Floride. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. Familiar with, and accept the obligations of section 620 192, Florida Statutes  SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Additions of Lach General Partner (po NOT Use Post Office Box Numbers)  CHGP. CORP.  986/1 E. BRODDURAD BAY HARBOK FLORIDA 33/174  000002370-01045-007 ********156.25 ********156.25	10 BALFOUR	DRIVE			
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 staten 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 ENTITION.	10a, Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above named limited partnership orgenized or registered under the laws of the State of Florida, submits this statem 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 heroby accept the appointment of registeragent. 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 ENTITED MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner(s)  11b. City, State 8 7th Code  11c. Pocument Number  9867 F. BRONDIEN  DAY HAMBOK  FLORIDA  33154  00000012377—01045—007  ******156.25	an the Book	· FLORIDA			
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). Thereby accept the appointment of register agent. Lam 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 ENTIT	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 heroby accept the appointment of registe agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes  BIGNATURE (Registered Agent Accepting Appointment).  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner  A CORP.  11b. City, State & Zip Code  11c. Registration/ Document Number  11b. City, State & Zip Code  11c. Progretation/ Document Number  11d. Document Number  11d. Progretation/ Document Number  11d. Progretation/ Document Number  11d. Progretation/ Document Number  11d. State & Zip Code  11d. Progretation/ Document Number  11d. State & Zip Code  11d. Progretation/ Document Number  11d. State & Zip Code  11d. Progretation/ Document Number  11d. State & Zip Code  11d	BAK HAR 1000K	1 33/14.	City		FL Zip Code
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT	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)  11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)  11b. City, State 8 7tp Code  11c. Registration/ (Document Numbers)  11b. City, State 8 7tp Code  11c. Registration/ (Document Numbers)  11d. Proceded States of the Composition of Co	for the purpose of changing its registered office or r	egistered agent, or both, in the State of Flo			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  CHGP. CORP.  986/E. BRODDUEL BAY HARBOR FLORIDA 33/54.  DDDDD2370520- 12/12/37D1045007 *****156.25 *****156.25	SIGNATURE (Registored Agent Accepting Appointment)			. DATE	
	CHGP. CORP. 986/E. BRONDVIEW BAY HAKBOK STUBBLE DOCUMENT DR. 33154.  ODDOO 2370520-12/12/97-01045-007 *****156.25 *****156.25	A GENERAL PARTNER THAT MUST	IS A CORPORATION, BE REGISTERED AN	LIMITED PAR ID ACTIVE WI	TNERSHIP OR OTHE ITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s) 118. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11b. City, State 8 7tp Code 11c. Registration/ Document Number	23/J74 000002370520	11. Name(s) of General Partner(s)	Address of Each Gener (Do NOT Use Post Office B	ral Pariner Box Numbers) 11b.	City, State & 7 ip Code	
CHEP CORP action BRODDIES BAY HARBOR 579886	23/J74 000002370520	CHEP CORP.	9561 E. BR	CODVIEW B	BY HARBOR	379886
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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. To 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 T 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 a mual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certily 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.

gring Form CHGP, CORP BY SUSSMA Baylino Tolephone Number 305-866-1637 SIGNATURE \_\_