## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT\* 1997

FLORIDA STRIKERS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

DOCUMENT # **A32165** 

FILED

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SECRETAL OF STATE TALLAHASSEE, FLORIDA

Daytime Telephone Number



Mailing Address 1790 CORAL WAY, SUITE 200 MIAMI FL 33145	Principal Office Address 1790 CORAL WAY. SUITE 200 MIAMI FL 33145		3. Date Formed or Registered 10/30/1991	58. Capital Contributions as Shown on record. \$300,000.00
			3a, Date of Last Report 12/14/1995	<b>5b.</b> Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:
16501 N.W. 16 Court	16501 N.W. 16 Court		FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0294612	Applied For Not Applicable
City & State  Miamí FL	City & State		7. Certificate of Status Desired	\$8.75 Additional
33169 Country USA	<sup>Z</sup> 233169	Country USA		Fee Required  State (See reverse side for fee information)
- 9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office	
SUAREZ, AMANCIO VICTOR 2960 CORAL WAY		Name		
		Street Address (P.O. Box Number Is Not Acceptable) 16501 N.W. 16 Coourt		
MIAMI FL 33145		Suite, Apt. #, etc 30 100 211 9353 5		
	City Md - 3		- 135/13/37U111UU11 ・	
		Miami ####330.0EL 331690.00		
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).				
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. (Do NOT Use Post Office Bo	Partner x Numbers) 11b.	City, State & Zip Code	11c. Registration/
MIAMI INTL. SOCCER, INC.	2960 CORAL WAY	, A	AIAMI FL	S90813
COR POR	Ation 12/31	WAS	01350	N6 d
			corporation	into a com
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d	LC 55000	Coust	Coud war	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
12. J du hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I release the Division of				
Derporations from any liability of non-compliance with Sac this annual report is true and accurate and that my signat elypowered to execute this report as required by chapter	ction 119 07(3)(k) in the event that the inture shall have the same legal effects as	ormation supplied is de	eemed exempt from public access. I furth	er certify that the information indicated on

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