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

A32252

DOCUMENT#

FILED 98 DEC 24 PM 2: 13 SECRETARY OF STATE TALLAHASSEE, FLORIDA

AIRPORT EXECUTIVE TOWERS PARTNERSHIP					
Mailing Address	Principal Office Address		3, Date Formed or Registered	5a. Capital Contributions as Shown on record. \$2,700,000.00 5b. Amount of Capital Contributions in FLORIDA to date:	
C/O WOLPERT & KAUFMAN. P.A. 9200 S. DADELAND BLVD #614 MIAMI FL 33156	C/O WOLPERT & KAUFMAN, P.A. 9200 S. DADELAND BLVD #614 MIAMI FL 33156		11/14/1991 3a. Date of Last Report 11/17/1997		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation		
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 65-0296876		Applied For Not Applicable
Zip Country	Zip Country		7. Certificate of Status Desired		\$8.75 Additional Fee Required
			8. Make check payable to: Dept. of S	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		
ALHAMBRA REGISTERED AGENTS, INC. TWO ALHAMBRA PLAZA, STE. 1202 CORAL GABLES FL 33134		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code			
10a. Pursuant to the provisions of sections 620.1051 and 620.1051 and 620.1051, 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 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)	11a. Address of Each General (Do NOT Use Post Office Box	Partner Numbers) 1	1b. City, State & Zlp Code	11c.	Registration/ Document Number
AIRPORT EXECUTIVE TOWERS I & U, INC.	9200 S. DADELAND BLVD		MIAMI FL 33156	\$80030	
•			400002 ⁻ -81/14, ****52	7425 193-01 18.25	5848 8 115807 *****\$26.25
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 eath. 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 Ybu