

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

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| LIMITED PARTNERSHIP ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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| 1. Name of Limited Partnership PARK CENTER PLAZA, LTD. | 1a. DOCUMENT # A33211 |
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| Mailing Address 2121 PONCE DE LEON PH-2 CORAL GABLES FL 33134 | Principal Office Address 2121 PONCE DE LEON PH-2 CORAL GABLES FL 33134 | 3. Date Formed or Registered 07/22/1992 | 5a. Capital Contributions as Shown on record \$1,250,000.00 |
| | | 3a. Date of Last Report 03/10/1997 | 5b. Amount of Capital Contributions in FLORIDA to date: \$1,250,000.00 |
| | | 4. State or Country of Formation FL | |
| 2. Mailing Address c/o Wolpert & Kaufman, P.A. Suite, Apt. #, etc. 9200 S. Dadeland Blvd., #614 City & State Miami, FL Zip 33156 | 2a. Principal Office Address c/o Wolpert & Kaufman, P.A. Suite, Apt. #, etc. 9200 S. Dadeland Blvd., #614 City & State Miami, FL Zip 33156 | 6. FEI Number 65-0346140 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| | | 7. Certificate of Status Desired | <input type="checkbox"/> \$8.75 Additional Fee Required |
| 8. Make check payable to: Dept. of State (See reverse side for fee information) | | | |

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| 9. Name and Address of Current Registered Agent BOGGIO, LLOYD CLINTON INTERNATIONAL GROUP 2121 PONCE DE LEON PH-2 CORAL GABLES FL 33134 | 10. If changed, new Registered Agent/Office Name Alhambra Registered Agents, Inc. Street Address (P.O. Box Number Is Not Acceptable) 2 Alhambra Plaza Suite, Apt. #, etc. Suite 1202 City Coral Gables Zip Code FL 33134 |
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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.

ALHAMBRA REGISTERED AGENTS, INC.

SIGNATURE (Registered Agent Accepting Appointment) By: *Martin J. Genauer*, Martin J. Genauer, VP, DATE **October 3, 1997**

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

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| 11. Name(s) of General Partner(s) PARK CENTER PLAZA, INC. | 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) -168 S.E. 1ST ST., #12 % Wolpert & Kaufman, PA 9200 S Dadeland Blvd. Suite 614 | 11b. City, State & Zip Code -MIAMI-FL Miami, FL 33156 | 11c. Registration/Document Number V45162 60002527-01000511-2 KWM |
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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.

PARK CENTER PLAZA, INC.

SIGNATURE By: *Eugene M. Erwin*
 Eugene M. Erwin, President

DATE **October 15, 1997**

Daytime Telephone Number **(305) 670-1572**

CR2E003 (6/97)