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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A33461**

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SECRETAL / B. STATE TALLAHASSEE, FLORIDA



| EXCEL SAMPLE, LTD. | | | OJAK IKI OKAK OLUH BIDI DIJIK DIDIK BIDI BIDI BIDI | |
|--|---|--|--|--|
| Mailing Address 6262 BIRD RD., SUITE 3 | Principal Office Address 6262 BIAD RD SUITE 31 | 3. Date Formed or Registered 09/24/1992 | 58. Capital Contributions as Shown on record \$7,000.00 | |
| MAMI FL 33155 | MIAMI FL 33155 | 3a. Date of Last Report 11/07/1995 | 5b. Amount of Capital | |
| 2. Mailing Address | 28. Principal Office Address | 4. State or Country of Formation | Contributions in FLORIDA to date: | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 6. FEI Number 65-0385268 | Applied For Not Applicable | |
| City & State | City & State | 7. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| Zip Country | Zip Count | | of State (See reverse side for fee information | |
| 9, Name and Address of Current | Registered Agent | 10. If changed, new Register | red Agent/Office | |
| ZULUETA, FERNANDO J. | | Name | | |
| 6262 BIRD ROAD, SUITE 3-I MIAMI FL 33155 | | Street Address (P.O. Box Number Is Not Acceptable) | | |
| | | Suite, Apt. #, etc | | |
| | Ċity | | FL Zip Code | |
| for the purpose of changing its registered office or ragent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT | ol section 620 192, Florida Statutes | ch change was authorized by its general partner(s). I he | E | |
| MUST | BE REGISTERED AND A | CTIVE WITH THIS OFFICE. | <u> </u> | |
| 11, Name(s) of General Partner(s) | Address of Each General Partne 11a. (Do NOT Use Post Office Box Numl | pers) 11b. City. State & Zip Code | 11c. Registration/ Document Number | |
| EXCEL DEVELOPMENT CORPORATIO | 6262 BIRD ROAD, SUITE | MIAMI FL | K65519 | |
| | | 900002 -12/20 ***1 | OBE17541 Ø84-01078002 91,28 ***•191,28 | |
| • | | | | |
| Note: General partners MAY NOT | he changed on this form: an | amendment must be filed to of | nanne a general nartner | |
| I do hereby certify that the information supplied with the Corporations from any liability of non-compliance with | ais filing is voluntarity furnished and does not qualify | for the exemption stated in Section 119 07(3)(k), Florid | la Statutes I release the Division of | |

| 12. | I do nereby certify that the information supplied with this filling is voluntarily turnished 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 truster |
| | empowered to execute this report as required by chapter 620, Florida Statutes. |
| | |

SIGNATURE Alia Denies DATE 11/24/94

Typed or Printed Name of General Partner Signing Form ALINA J. ORRIOLS, Daytime Telephone Number 305-LALZ-2800