

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JAN 29 AM 9:44

1. Name of Limited Partnership BARCELONA PARTNERS LIMITED		1a. DOCUMENT # A000000073 A93000000073	
2. Mailing Address c/o HUMUS CORPORATION 810 Lugo Avenue Coral Gables FL		3. Date Formed or Registered 01/21/93	
2a. Principal Office Address c/o HUMUS 810 LUGO AVENUE		3b. Date of Last Report 03/17/97	
2b. Mailing Address 1925 Brickell Ave. D206		4. State or Country of Formation FLORIDA	
2c. Suite, Apt. #, etc. D206		5a. Capital Contributions as Shown on record. \$3,110,000	
2d. City & State MIAMI, FL 33129		5b. Amount of Capital Contributions in FLORIDA to date: \$3,110,000	
2e. Zip 33129		6. FEI Number 65-0381036	
2f. Country USA		7. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
2g. City & State CORAL GABLES, FL 33156		8. Make check payable to: Dept. of State (See reverse side for fee information)	
2h. Zip 33156		8. Applied For ☐ Not Applicable	
2i. Country USA			

9. Name and Address of Current Registered Agent ROGER BESU 815 NW 57TH AVENUE SUITE #484 MIAMI, FL 33126	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 1925 Brickell Ave. Suite, Apt. #, etc. Suite D206 City Miami FL Zip Code 33129
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10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

12/24/97

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) HUMUS CORPORATION	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 810 LUGO AVENUE	11b. City, State & Zip Code CORAL GABLES, FL 33156	11c. Registration/Document Number V72468
400002420334--7 -02/03/98--01033--008 ***526.25 ***526.25			

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 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.

SIGNATURE

X Nelson Fernandez

DATE

12/24/97