


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 INTERNATIONAL HOMES ASSOCIATES I, LTD.		1a. DOCUMENT # A93000000240	
Mailing Address 15800 SW 88TH STREET MIAMI FL 33196		Principal Office Address 15800 SW 88TH STREET MIAMI FL 33196	
2. Mailing Address 5220 NW 107 AVE		2a. Principal Office Address 5220 NW 107 AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33178		Zip 33178	
		3. Date Formed or Registered 02/22/1993	
		3a. Date of Last Report 12/22/1997	
		4. State or Country of Formation FL	
		5a. Capital Contributions as Shown on record. \$2,000,000.00	
		5b. Amount of Capital Contributions in FLORIDA to date:	
		6. FEI Number 59-3166765 <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)	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 FEB -2 PH 4:26



9. Name and Address of Current Registered Agent STRELITZ, BRIAN L 15800 SW 88 STREET MIAMI FL 33196		10. If changed, new Registered Agent/Office Name SAME Street Address (P.O. Box Number is Not Acceptable) 5220 NW 107 AVE Suite, Apt. #, etc. City MIAMI FL Zip Code 33178	
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)		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) BRIDORO, INC. BELCO CONSTRUCTION CORP.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 15800 SW 88 STREET 11020 N. KENDALL DRIV	11b. City, State & Zip Code MIAMI FL 33196 MIAMI FL 33176	11c. Registration/Document Number P93000007647 L27354 7000002770587--3 -02/09/99-01125--002 ****526.25 ****526.25 62 2-3-99
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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.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

2/1/99
305-640-1157

CR2E003 (8/98)