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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9300000526**

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 16 AM11: 28

JE 12/18



Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
11096 BISCAYNE BLVD., SUITE 402 MIAMI FL 33161	11098 BISCAYNE BLVD SUITE 4 MIAMI FL 33161	102	05/14/1993 3a. Date of Last Report	\$100.00
			01/21/1997	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		65-0416901	Not Applicable
Zip Country	ZID	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
			8. Make check payable to: Dopt	of State (See reverse side for fee information
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
BEOTON: MOULE		Name		
BEDZOW, MICHAEL % BEDZOW, KORN & KAN, P.A.		Streol Address (P.O. Box Number Is Not Acceptable)		
SCHOOLING RUNN A RAIN PA				
20803 BISCAYNE BLVD., SUITE 200		Suite, Apt #, ε	elc.	
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180	1 and 620 192 Florida Statutos, the above-name	Cily		FL Zip Code of the State of Florida, submits this stater
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180 10a, Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the obligations of the control of the co	e or registored agent, or both, in the State of Finitions of section 620.192 Florida Statutes.	City cold limited partners orida Such change	ship organized or registered under the laws e was authorized by its general partner(s). I DA PARTNERSHIP OR OTH	FL of the State of Florida, submits this statem hereby accept the appointment of registers.
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180 10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the purpose of changing its registered Agent Accepting Appointment A GENERAL PARTNER THAT MULTIPLE CONTRACTOR OF THE PARTNER THAT MULTI	e or registered agent, or both, in the State of File Illions of section 620, 192 Florida Statutes. AT IS A CORPORATION, IST BE REGISTERED AN	City and limited partners orida Such change LIMITED F ID ACTIVE	ship organized or registered under the laws e was authorized by its general partner(s). I DA PARTNERSHIP OR OTH	FL of the State of Florida, submits this stater hereby accept the appointment of registe JER BUSINESS ENTIT Registration/
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180 10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the purpose of changing its registered Agent Accepting Appointment A GENERAL PARTNER THAT MULTIPLE ACCEPTANCE OF THE ACCEPTANCE OF TH	e or registored agent, or both, in the State of Fi allions of section 620.192 Florida Statutos. AT IS A CORPORATION, IST BE REGISTERED AN	City City Indicate partners or ida Such change LIMITED F ND ACTIVE Tal Partner sox Numbers 1	ship organized or registered under the laws e was authorized by its general partner(s). I DA PARTNERSHIP OR OTH E WITH THIS OFFICE.	of the State of Florida, submits this statement of register appointment of register appointment of register at a statement of reg
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180 10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the obligated Agent Accepting Appointment A GENERAL PARTNER THAML 11. Name(s) of General Partner(s)	e or registored agent, or both, in the State of Finitions of section 620.192 Florida Statutes. AT IS A CORPORATION, IST BE REGISTERED AN Address of Each Gener (Do NOT Use Post Office B	City City Indicate partners or ida Such change LIMITED F ID ACTIVE ral Partner sox Numbers 1	phip organized or registered under the laws e was authorized by its general partner(s). I DA PARTNERSHIP OR OTHE WITH THIS OFFICE. 11b. City, State & Zip Code	FL of the State of Florida, submits this stater hereby accept the appointment of registe IER BUSINESS ENTIT 11c. Registration/ Document Number
20803 BISCAYNE BLVD., SUITE 200 AVENTURA FL 33180 10a. Pursuant to the provisions of sections 620.105 for the purpose of changing its registered office agent. I am familiar with, and accept the oblegation of the purpose of changing its registered office agent. I am familiar with, and accept the oblegation of the purpose of changing its registered office agent. I am familiar with, and accept the oblegation of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of changin	e or registored agent, or both, in the State of Finitions of section 620.192 Florida Statutes. AT IS A CORPORATION, IST BE REGISTERED AN Address of Each Gener (Do NOT Use Post Office B	City City Indicate partners or ida Such change LIMITED F ND ACTIVE Tal Partner sox Numbers 1	phip organized or registered under the laws e was authorized by its general partner(s). I DA PARTNERSHIP OR OTHE WITH THIS OFFICE. 11b. City, State & Zip Code CORAL GABLES FL 33134	FL of the State of Florida, submits this stater hereby accept the appointment of registe IER BUSINESS ENTIT 11c. Registration/ Document Number M55492

12. I do hereby certify that the information supplied with this filling 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 logal effects as if made under earth. 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 floride Statutes.

SIGNATURE

PACIFIC International South Boach - the of Goneral Parlner Signing Form - CAMILO J. RLANCO

DATE 10/29/97

CH2E003 (6/97)