CT TO REVOCATION AND \$500 PENALTY FEE

PARTNERSMIP ANNUAL REPORT 1999

Corporations from any liability of non-compliance with Serti this annual report is true and accurate and thay my signature.

SIGNATURE



FLORIDA DEPARIMIENT OF STATE
Sandra B. Mortham

Secretary of State

Name of Limited Partnership

1a. DOCUMENT # A93000001219

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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an Section 1197(SAS), fronted satisfies 1 release the Deviation of sempt from public access. I further certify that the information indicated on the property of the limited partnership, receiver or trustee

### Principal Office Address Principal Office Address 3. Date Formed or Registered 5a. Capital Contributions as Shown on record. 11/23/1993 \$100.00 \$225 AVIATION AVE #700 COCONUT GROVE FL 33133 COCONUT GROVE FL 33133 \$100.00 \$10/03/1997 4. State or Country of Formation FL Suite, Apt. #, etc. \$2a. Principal Office Address FL Suite, Apt. #, etc. \$5b. Amount of Capital Contributions in FLCRIDA to gate: Contributions in FLCRIDA Contributions as Shown on record. \$100.00 \$5b. Amount of Capital Contributions in FLCRIDA Contributions in FLCRIDA Contributions as Shown on record. \$100.00 \$100.00 Contributions as Shown on record. \$100.00 \$100.00 Contributions in FLCRIDA Contributions as Shown on record. \$100.00 \$100.00 Applied For Not Applicable City & State		7.0000001	7.00000012.10			
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BOGGIO, LÉCYD CLINTON INTERNATIONAL GROUP 2121 PONCE DE LEON BLVD. PH-2 CORAL GABLES FL 33434 CIVICATION AVENUE Suite. Apr. #. etc. # 700 CIVICAL GABLES FL 33434 TO A. Pursuant to the provisions of sections 620,1051 and 620,102. Fibrida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida submits this stater for the purpose of changing its registered office or registered agent octobil, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of register agent. I am familiar with, and accept the obligations of some 620,1921 roughs actually. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTINGS. MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Accress of Each General Partner Indication of City, State & Zip Code 11c. Registration opcoment Number	Z c Country	Zip				
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CORAL GABLES FL 33134 Cocacet Grove. TL 33/3/3. 10a. Pursuant to the provisions of sections 620,1051 and 620,192. Floring Statutes, the above-named limited partnership organized or registered under the laws of the State of Ficridal submits this stater for the purpose of changing its registered office or regisfered agent or porty in the State of Floridal. Such change was authorized by its general partner(s). I hereby accept the appointment of register agent. I am familiar with, and accept the obligations of section 620, 921 Fortial Sequites. SIGNATURE (Registered Agent Accepting Appointment) DATE OACE SIGNATURE (Registered Agent Accepting Appointment) DATE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Accrease of Each General Partner 11b. City. State & Zip Code 11c. Registration/ Document Number	CLINTON INTERNATIONAL GROUP		Street Address (P.O. Box Number Is Not Acceptable): 3225 Aviation Avenue, 8700			
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