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

A9300001385

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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IBEX TRINITY PARTNERS, LTD.		1 TODIEN SOLD TOLIK BENDE TRILLE DELIK BENDE HINDE HINDE HINDE HINDE BURGE HINDE HINDE HINDE HINDE FOREIT FOREI		
Melling Address 2333 PONCE DE LEON BLVD SUITE 650 CORAL GABLES FL 33134	Principal Office Address 2333 PONCE DE LEON BLVI CORAL GABLES FL 33134	D., Suite 650	3. Date Formed or Registered 12/20/1993 38. Date of Last Report 01/11/1996	58. Capital Contributions as Shown on record. \$559,350.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	28. Principal Office Addres	ss	4. State or Country of Formation	Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	·	6. FEI Number 65-0454835	Applied For Not Applicable
City & State	City & State		7. Certificate of Status Desired	
Zip Country	Zip	Country	8. Make check payable to: Depi	\$8.75 Additional Fee Required t. of State (See reverse side for fee informate)
O Name and Address of C	turent Barletared Anent		10. If changed, new Regist	ored ApontiOffice
9. Name and Address of Current Registered Agent GUTTMAN & DEL VALLE, P.A.		Name Value Name		
2333 PONCE DE LEON BLVD., SUITE CORAL GABLES FL 33134	E 650	Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc.		1/10
				Zip Code
	lice or registered agent, or both, in the State of			
for the purpose of changing its registered of agent. I am familiar with, and accept the obli SIGNATURE (Registered Agent Accepting Appointme	fice or registered agent, or both, in the State of Igations of section 620.192, Florida Statutes.	named limited partner of Florida. Such chang	pe was authorized by its general partner(s) I	of the State of Florida, submits this stateme hereby accept the appointment of registers
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SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH M 11. Name(s) of General Partner(s) IBEX TRINITY CORP. Note: General partners MAY 12. I do hereby certify that the information supplies. Corporations from any liability of accurate and that empowered to execute the report as the information supplies.	NOT be changed on this feath this filing is voluntarily furnished and do co with Section 113. (3)(k) in the event that it my shadow shift in the sent of the section 113. (3)(k) in the event that it my shadow shift is shift in the event that it my shadow shift in the sevent that it my shadow shift in the event that it my shift in the event	named limited partner of Florida. Such change N., LIMITED AND ACTIV sergel Partner coe Box Numbers) ON BL Orm; an ame set the information supplicits as if made under or	DA PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code CORAL GABLES FL 33134 CORAL GABLES FL 33134 Indianate must be filed to continuous to the continuous	of the State of Florida, submits this statementerby accept the appointment of registers. TE SER BUSINESS ENTITY 11c. Registration/ Document Number P93000086567 P93000086567 P3795-01001-007 \$776.25 ****,76.25