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

LIMITED PARTNERSHIP ANNUAL REPORT 1997

Typed or Printed Name of General Partner Signing Form



THE 1177 KANE CONCOURSE PARTNERSHIP, LTD.

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9400000725** 

DIVISION OF CORPORATIONS

97 JAN -3 PM 12: 37



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Mailing Address 1177 KANE CONCOURSE. SUITE 201 BAY HARBOR ISLANDS MIAMI BEACH FL		Principal Office Address 1177 KANE CONCOURSE. 8 BAY HARBOR ISLANDS	1177 KANE CONCOURSE. SUITE 201		3. Date Formed or Registered 05/26/1994  3a. Date of Last Report 04/09/1996  4. State or Country of Formation FL		5a. Capital Contributions as Shown on record. \$1,380,000.00  5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address		28. Principal Office Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6	FE1 Number <b>65-0496329</b>	Applied For Not Applicable		
City & State		City & State		7	Certificate of Status Desired			
Zip Country		Zip Country			8. Make check payable to: Dopt. of State (See reverse side for fee inform		Fee Required	
		1			Make check payable to copie of		ered side for ree midmisse	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office					
MILLER, CAROLYN C/O 1177 KANE CONCOURSE, INC. 1177 KANE CONCOURSE, SUITE 118 BAY HRBR IS., MIAMI BEACH FL			Name					
			Street Address (P.O. Box Number Is Not Acceptable)					
			Suite, Apl. #, etc.					
			City			FL	Zip Code	
agent. Í a SIGNATURE (Reg	am familiar with, and accept the oblig gistered Agent Accepting Appointmen ERAL PARTNER TH	pe or registered agent, or both, in the State ations of section 620.192. Fiorida Statutes.  1)	N, LIMITED	PARTN	DATE ERSHIP OR OTHE	<u> </u>		
11. Name(	(s) of General Partner(s)	11a. (Do NOT Uso Post O		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
	NE CONCOURSE, INC.		1177 KANE CONCOURSE,		MIAMI BEACH FL		P94000039157	
		1	1			1		
4					200002 -01/15 ****5	<b>058</b> : /970 8 <b>5.</b> 00	26:29: 1007-021 ****585.00	
٠.		IOT be changed on this			****5	85.00	****585,(0)	

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 Statules.

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