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

a. DOCUMENT # A94000001534 FILED SECRETARY OF STATE DIVISION OF CONTRACTORY

97 JAN 22 PN 2:53





iling Address D1 PONCE DE LEON BLYD., SUITE 600 CORAL GABLES FL 33134	Principal Office Address 901 PONCE DE LEON BLVD SUITE 600 CORAL GABLES FL 33134 2a. Principal Office Address Suite, Apt. #, etc.		11	3. Date Formed or Registered 11/16/1994 3a. Date of Last Report 10/05/1995 4. State or Country of Formation FL 6. FEI Number 65-0533893		58. Capital Contributions as Shown on record. \$2,029.50 5b. Amount of Capital Contributions in FLORIDA to date: Applied For Not Applicable	
COMME CARDLES PE 33134							
. Mailing Address							
uite, Apt. #, etc.			6. FEI				
ity & State	City & State			ilicate of Status Desired			
ip Country	Zip Country		8. Ma	7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current	Registered Agent		10.	If changed, new Registere	d Agent/Office		
NEXT BOYNTON DEVELOPMENT CORPORATION 901 PONCE DE LEON BLVD., SUITE 600 CORAL GABLES FL 33134		Name					
		Streel Address (P.O. Box Number Is Not Acceptable)					
CONAL GABLES FL 33134		Suite, Apt. #, etc.		C.			
	City		FL Zip Code				
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for the purpose of changing its registered office or a agent. I am familiar with, and accept the obligations	egistered agent, or both, in the State of			y its general partner(s). I her	he State of Flori eby accept the	da, submits this stateme	
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