

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

LIMITED PARTNERSHIP ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Norman Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership NEXT BOYNTON DEVELOPMENT COMPANY, LTD.		1a. DOCUMENT # A94000001534	
Mailing Address 901 PONCE DE LEON BLVD., SUITE 600 CORAL GABLES FL 33134		Principal Office Address 901 PONCE DE LEON BLVD., SUITE 600 CORAL GABLES FL 33134	
2. Mailing Address 3850 Bird Road 2nd Floor Miami, Florida 33146		2a. Principal Office Address 3850 Bird Road 2nd Floor Miami, Florida 33146	
Zip	Country	Zip	Country
		3. Date Formed or Registered 11/16/1994	5a. Capital Contributions as Shown on record. \$2,029.50
		3a. Date of Last Report 01/22/1997	5b. Amount of Capital Contributions in FL ORIDA to date:
		4. State or Country of Formation FL	
		6. FEI Number 65-0533893	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)			

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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9. Name and Address of Current Registered Agent NEXT BOYNTON DEVELOPMENT CORPORATION 901 PONCE DE LEON BLVD., SUITE 600 CORAL GABLES FL 33134		10. If changed, new Registered Agent/Office Name 3850 Bird Road 2nd Floor Miami, Florida 33146 City FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s) I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s) NEXT BOYNTON DEVELOPMENT COR	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 901 PONCE DE LEON BLV	11b. City, State & Zip Code CORAL GABLES FL 33134	11c. Registration/Document Number P94000083740 500002560665--3 -06/16/98--01055--003 ****650.00 ****650.00 REINSTATEMENT 98 06/12

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing 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 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 Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

MANUEL M. MATO

DATE **6/11/98**

Daytime Telephone Number **305) 445-6171**

CR2E003 (6/97)