## 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

SIRIUS HOMES, LTD.

1a. DOCUMENT # **A9500000564** 

FILED 97 JAN -3 AM 11: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Mailing Address  8960 SW 87TH COURT SUITE 8  MIAMI FL 33176	Principal Office Address 8960 SW 87TH COURT SUITE 8 MIAMI FL 33176		3. Date Formed or Registered 04/07/1995 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$90,000.00	
MIAMI PL 331/6			01/03/1996  4. Stale or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	<b>2a.</b> Principal Office Address		FL	\$90,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FET Number 65-0573231	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country		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 Registered Agent/Office					
9. Name and Address of Current Registered Agent  MURRAY, DONALD J  9200 SOUTH DADELAND BLVD.  SUITE 515		Name			
		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  Suite, Apt. #, etc.			
					MIAMI FL 33156
, and the state of			FL		
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 Agont 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)	Address of Each General Par 11a. (Do NOT Use Post Office Box No	ther umbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
STAN BULBIN CUSTOM BUILDERS, $\mathfrak{T}N\mathcal{C}$ ,	8960 SW 87TH COURT, #	M	IIAMI FL 33176	M18020	
			55 5		
• 1			-		
, "					

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

12. Ido 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 Statutos Trelease the Division of

SIGNATURE MANS SUM NEILS, BURIN V-P DATE 12/26/96

Typed or Printed Name of General Partner Signing Form STAN RURIN CUSTOM BLORY, FMC, GMRL PTAYINE Telephone Number 305, 598, 0495

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