

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 OCT 26 AM 9:48

1. Name of Limited Partnership

1a. DOCUMENT #  
A95000000920

COLONNADE PARTNERS, LTD.



Mailing Address

Principal Office Address

2333 PONCE DE LEON BLVD., SUITE 650  
CORAL GABLES FL 33134

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CORAL GABLES FL 33134

3. Date Formed or Registered

06/20/1995

5a. Capital Contributions as  
Shown on record.

\$900.00

3a. Date of Last Report

12/31/1997

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

\$900.00

4. State or Country of Formation

FL

6. FEI Number

65-0594738

☐ Applied For  
☒ Not Applicable

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

GUTTMAN & DEL VALLE, P.A.  
2333 PONCE DE LEON BLVD., SUITE 650  
CORAL GABLES FL 33134

10. If changed, new Registered Agent/Office

Name  
RICHARD GUTTMAN  
Street Address (P.O. Box Number Is Not Acceptable)  
100 SE 2ND STREET  
Suite, Apt. #, etc.  
SUITE 4000  
City  
MIAMI

FL Zip Code  
33131

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)

*R. Guttman*

DATE 10-5-98

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)

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

IBEX COLONADE CORP.

2333 PONCE DE LEON BL

CORAL GABLES FL 33134

V35335

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-10/28/98--01091--010  
\*\*\*\*141.25 \*\*\*\*141.25

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

DATE

Typed or Printed Name of General Partner Signing Form

JOSE F. ROSADO, AS PRESIDENT OF  
IBEX COLONADE CORP.

Daytime Telephone Number (305) 447-8697

CR2E003 (8/98)