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

LIMITED PARTNERSHIP ANNUAL REPORT 1997

8012 NW 154TH STREET LTD.



FLORIDA DEPARTMENT OF STATE

Sañdra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A95000001540** 

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

96 NOV 27 AH 8: 29



Mailing Address 7134 ABBOTT AVE. MIAMI BEACH FL 33141		Principal Office Address 8012 NW 154TH ST. MIAMI LAKES FL 33014			3. Date Formed or Registered 10/12/1995 3a. Date of Last Report 01/02/1996	5a. Capital Contributions as Shown on record. \$100.00  5b. Amount of Capital Contributions in FLORIDA to date:  Applied For	
2. Mailing Address		2a. Principal Office Address			4. State or Country of Formation		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6. FEI Number		
City & State		City & State			Applied For Not Applicable  7. Certificate of Status Desired  88.75 Additional		
Zip	Country	ntry Zip		ountry		\$8.75 Additional Fee Required of State (See reverse side for fee information)	
			·····	<u>l</u>			
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
SALAZAR, JOSE			Name				
7134 ABBOTT AVENUE			Street Address (P.O. Box Number Is Not Acceptable)				
MIAMI BEACH FL 33141			Suite, Apt. #, etc.				
			04.			· · · · · · · · · · · · · · · · · · ·	I + - A
			City			FL	Zip Code
for the purp agent. I am							
A GENER		S A CORPORATION, L BE REGISTERED AN	D ACTIV			R BUSI	NESS ENTITY
11. Name(s)	of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b.	City, State & Zip Code	11c.	Registration/ Document Number
8012 N.W. 154TH STREET CORP.		7134 ABBOTT AVENUE		MIAMI BEACH FL 33141		P95000078540	
; ,					7000026 -12/11, ****18	755-50 91.25	5775 1024025 ****191.25
Note: Gene	eral partners MAY NOT	be changed on this form	n; an am	endme	nt must be filed to cha	nge a a	eneral partner.

CR2E003 (6/96)

SIGNATURE DATE 11-6-95

Typed or Printed Name of General Parliner Signing Form. Time Solazy Daytime Telephone Number 305-866+313

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

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

empowered to execute this report as required by chapter 620, Florida Statutes.