

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 OCT - 8 PM 1:39

LIMITED PARTNERSHIP  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #  
**A95000001686**

**THE ISIDORE MISRAHI FAMILY LIMITED PARTNERSHIP #  
1**



Mailing Address

~~NO. 403, 1666 KENNEDY CAUSEWAY  
NORTH BAY VILLAGE FL 33141~~

Principal Office Address

~~NO. 403, 1666 KENNEDY CAUSEWAY  
NORTH BAY VILLAGE FL 33141~~

3. Date Formed or Registered

11/01/1995

5a. Capital Contributions as  
Shown on record

\$416,050.00

3a. Date of Last Report

12/07/1995

5b. Amount of Capital  
Contributions in FLORIDA  
to date

\$416,050.00

4. State or Country of Formation

FL

2. Mailing Address

9805 NW 52 St

2a. Principal Office Address

9805 NW 52 St

Suite, Apt. #, etc.  
Apt. 517

Suite, Apt. #, etc.  
Apt. 517

6. FEI Number **65-0627141**  
**APPLIED FOR**

Applied For  
 Not Applicable

City & State  
Miami, Florida

City & State  
Miami, Florida

7. Certificate of Status Desired

\$8.75 Additional  
Fee Required

Zip 33178 Country USA

Zip 33178 Country USA

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

MISRAHI, ISIDORE TRUSTEE  
~~#403, 1666 KENNEDY CAUSEWAY NORTH  
NORTH BAY VILLAGE FL 33141~~

10. If changed, new Registered Agent/Officer

Name  
MISRAHI, ISIDORE TRUSTEE  
Street Address (P.O. Box Number is Not Acceptable)  
9805 NW 52 St.  
Suite, Apt. #, etc.  
Apt 517  
City  
Miami, Florida  
Zip Code  
FL 33178

Zip Code  
FL 33178

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)

*Isidore Misrahi*

DATE **Oct. 1-96**

**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)

MISRAHI, ISIDORE TRUSTEE

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

~~1666 KENNEDY CAUSEWAY~~  
9805 NW 52 St. #517

11b. City, State & Zip Code

~~NORTH BAY VILLAGE FL~~  
Miami, Fl. 33178

11c. Registration/  
Document Number

~~A95000001686~~  
N/A

600001972686--2  
-10/14/96--01025--009  
\*\*\*\*576.25 \*\*\*\*576.25

**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)(\*) 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

*Isidore Misrahi*

DATE

**Oct 1-96**

Typed or Printed Name of General Partner Signing Form

**ISIDORE MISRAHI**

Daytime Telephone Number

**(305) 861-6002**

CR2E003 (6/96)