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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

DADE FOREIGN TRADE ZONE, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

1a. DOCUMENT # A9500001700

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



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Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
% ODED MELTZER, PRESIDENT 6431 COW PEN RD. MIAMI LAKES FL 33014	200 S. BISCAYNE BLVD., SUITE 2100 MIAMI FL 33131		ļ	11/06/1995 3a. Date of Last Report 03/13/1998	\$1,000.00  5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number		
				65-0741543	Applied For Not Applicable	
City & State	City & State			7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country		ļ	Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)		
				40		
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office			
FIELDSTONE LESTER & SHEAR 200 S. BISCAYNE BLVD., SUITE 2100			ess (P.O. Bo	ss (P.O. Box Number is Not Acceptable)		
MIAMI FL 33131		Suite, Apt. #, etc.				
		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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b. City, State & Zip Code		11c. Registration/ Document Number	
DADE FOREIGN TRADE ZONE, INC	% ODED MELTZER, PRESI		MIAMI LAKES FL 33014		V23803	
				200002 -01/15 *****!	7445723 799-01103-011 50.00 ****150.00	
Note: General partners MAY NOT b				nt must be filed to cha		

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 reculted by chapter 620, Florida Statutes.

BY: DADE FORE LOW TRADE INC., GENERAL PARTNER.