

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 18 PM 12:53



1. Name of Limited Partnership

1a. DOCUMENT #
A95000001989

IBEX BRICKELL PARTNERS LTD.

Mailing Address

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

Principal Office Address

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

3. Date Formed or Registered

12/20/1995

5a. Capital Contributions as
Shown on record.

\$198,000.00

3a. Date of Last Report

04/03/1997

5b. Amount of Capital
Contributions in FLORIDA
to date

\$198,000.00

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. State or Country of Formation

FL

6. FEI Number

65-0640457

☐ 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

Street Address (P.O. Box Number Is Not Acceptable)

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)

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

11b. City, State & Zip Code

11c. Registration/
Document Number

IBEX BRICKELL CORP.

2333 PONCE DE LEON BL

CORAL GABLES FL 33134

P95000096173

800002382278-8
-12/24/97-01065-004
******550.00 ****550.00**

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 form 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

Typed or Printed Name of General Partner Signing Form

Jose F. Rosado as President of

IBEX Brickell Corp.

Daytime Telephone Number

12-5-97

(305) 447-8697

CR2E003 (6/97)

LAW OFFICES OF
GUTTMAN & DEL VALLE

PROFESSIONAL ASSOCIATION
THE COLONNADE • SUITE 650
2333 PONCE DE LEON BLVD.
CORAL GABLES, FLORIDA 33134

TELEPHONE (305) 443-9740
FACSIMILE (305) 445-1015

RICHARD GUTTMAN
IGNACIO G. DEL VALLE

JORGE I.G. DEL VALLE

OF COUNSEL
RAQUEL M. MATAS
(305) 444-1965

December 16, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Attn: Partnership Section

RE: IBEX BRICKELL PARTNERS LTD.

Ladies and Gentlemen:

Enclosed please find Annual Report (1998) for the referenced limited partnership along with check made payable to the Florida Department of State in the amount of \$550.00 as follows:

a. Filing Fee	\$ 437.50
b. Supplemental Fee	\$ 103.75
c. Certificate of Status	\$ 8.75
Total	\$ 550.00

Please send the Certificate of Status to the undersigned at the above address at your earliest convenience.

Sincerely,

GUTTMAN & DEL VALLE, P.A.



Richard Guttman

:mk
Enclosures