

FILE IT 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

98 DEC 31 PM 4:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership		1a. DOCUMENT # A96000000361	
LaSalle Ventures One Ltd.			
Mailing Address 247 SW 8th Street Suite 111 Miami, Florida 33130		Principal Office Address 247 SW 8th Street Suite 111 Miami, Florida 33130	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
		3. Date Formed or Registered 2/23/96	
		3a. Date of Last Report 1998	
		4. State or Country of Formation FL	
		5a. Capital Contributions as Shown on record. \$1,000.00	
		5b. Amount of Capital Contributions in FLORIDA to date: \$1,000.00	
		6. FEI Number 65-0644402	
		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
		8. Make check payable to: Dept. of State (See reverse side for fee information) \$141.25	

9. Name and Address of Current Registered Agent Gavriel, Mairone c/o Mann & Mairone 1059 Collins Avenue, Suite 1240 Miami Beach, FL 33139		10. If changed, new Registered Agent/Office Name Gavriel Mairone c/o Mann & Mairone Street Address (P.O. Box Number Is Not Acceptable) 247 SW 8th Street Suite, Apt. #, etc. Suite 111 City Miami Zip Code FL 33130	
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 620.732, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment)		DATE 12/28/98	

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) LaSalle Ventures (Brickell), Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 247 SW 8th St. Suite 111	11b. City, State & Zip Code Miami, FL 33130	11c. Registration/ Document Number P96000016966
500002748795--3 -01/20/99--01114--007 ****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 BY: DATE December 28, 1998

By: LaSalle Ventures (Brickell), Inc.

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number 305-372-7400

CR2E003 (8/98)